UNC CHARLOTTE

Health Psychology PhD Program

Graduate Student Handbook

2020-2021

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1. General Description

a. Overview

The Health Psychology Program at UNC Charlotte offers students an opportunity to obtain their PhD in Health Psychology with a concentration in one of the following three areas: General, Clinical, and Community. As an interdisciplinary program, it has formal links with faculty in other colleges, departments, and programs in the university related to health research and policy, which allows students to receive a multidisciplinary learning experience.

b. Areas of Concentration (programs)

General

This concentration/program emphasizes both basic and applied research examining the biological, psychological, behavioral, social, cultural, and environmental correlates of health and illness. Upon completion, students will have a strong theoretical and methodological background that will allow them to design and conduct research in academic, medical/health, governmental, and private research settings.

Clinical

This concentration/program adheres to the Scientist-Practitioner (Boulder) Model. This program focuses on preventing and treating physical and mental health dysfunction by addressing psychological, behavioral, and social factors that contribute to the onset and progression of these dysfunctions. Graduates may assume positions in academic, medical centers or other medical settings, private practice, or other applied settings. Students in this program are eligible for clinical licensure in North Carolina and other states. As of 2012, the Clinical program has been continuously accredited by the American Psychological Association (APA)*.

Community

This concentration/program emphasizes the social and community factors that lead to healthy outcomes in individuals, and interventions in community systems that create stronger, healthier communities. Students in the community program will develop skills to conduct applied research and implement strategies to effect change in settings or communities that impact the health and well-being of individuals and families. Graduates choosing this concentration will be prepared to assume positions in universities or in a multitude of settings that require skills in applied research (e.g., program evaluation) and/or community intervention.

***For any questions about the program's accreditation status or about APA accreditation, in general, please contact:**
Office of Program Consultation and Accreditation / American Psychological Association
750 First Street, NE, Washington, DC 20002-4242
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org / Web: http://www.apa.org/ed/accreditation

c. General Program Goals and Philosophy

The Health Psychology Program at UNC Charlotte has as its objectives the training of students who will:

- Develop strong research skills that will enable them to contribute to the science of health and wellness.

- Obtain specific applied skills that will enable them to use knowledge from psychology to better understand disease, dysfunction, and the promotion of healthy lifestyles.

- Obtain educational training and supervised experience with faculty in psychology and related health professions that will enable them to develop an interdisciplinary perspective on health that they can apply to research, policy, and/or practice.

- Gain experience working with health practitioners from different fields, enabling them to become active participants in and leaders of multidisciplinary teams that seek to understand and improve health and wellness across disciplines.

- Be competitive applicants for academic and research positions. In addition, graduates from the program will be equipped to pursue a wide array of career opportunities.

d. Program Model

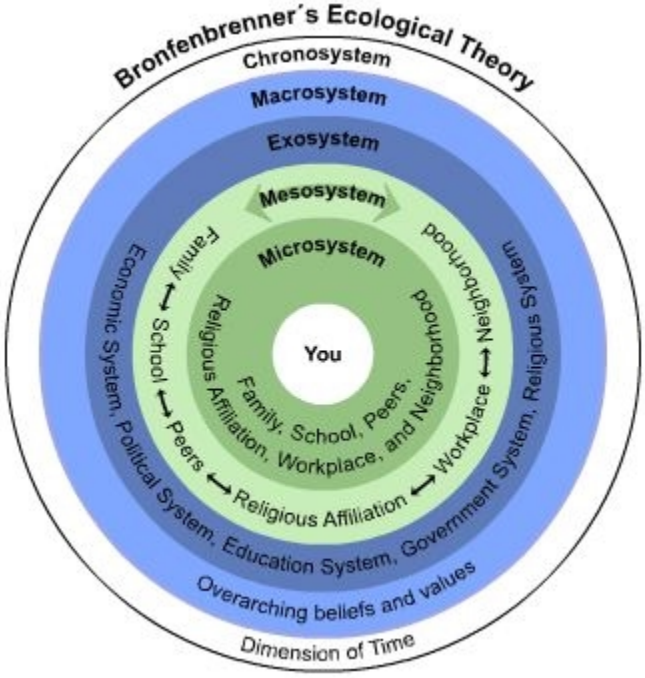
Health Psychology is a rapidly expanding field of basic and applied research that utilizes principles of psychology to impact health across the lifespan. More specifically, health psychology seeks to understand the role that behavior and its physiologic concomitants play in the etiology, treatment, and prevention of physical and mental illnesses, and the promotion of health and wellness. The biopsychosocial model is an important framework for health psychology, serving as the foundation for much of the theory building in this area. Although disease onset is typically triggered by physiological changes, the biopsychosocial model implies that the risk for illness, severity of symptoms, time course of illness, and recovery from illness are influenced by a complex matrix of psychosocial factors. Similarly, the promotion of health and wellness relies on knowledge of the interaction of community and social factors with individual physiological and behavioral characteristics. To understand and address these factors effectively, an interdisciplinary approach is essential.

Psychology, the science of human behavior and mental processes, is of critical importance for addressing the health of individuals, families, and communities. The field of psychology is particularly suited to address a wide range of factors that contribute to the health and well-being of people; applied psychologists have typically been trained in the “scientist-practitioner” model, combining expertise in research skills with specialized

intervention skills. At the same time, successful research and practice in health psychology requires collaborative work with professionals from multiple disciplines. Consequently, this program's interdisciplinary focus provides specific training for psychologists to work with researchers and practitioners from multiple disciplines.

More recently, the field has reoriented to consider additional spheres of interacting influence, to acknowledge and consider the complexity of human experience. The bioecological model of human development (Bronfenbrenner & Morris, 2006) provides a framework that recognizes the intersecting influences of personal, social, and broader ecological contexts across time, as they relate to trajectories of health and illness across the lifespan. Illustrated as a set of concentric circles, it suggests that influences on trajectories radiate outward from individual-level factors (e.g., temperament, attitude, etc.) to proximal (e.g., direct relationships in dyadic and occupational contexts) and distal levels (e.g., indirect relationships such as interactions with larger societal structures), recognizing continual patterns of interaction both inward and outward. Importantly, the bioecological model framework underscores the influence of time (i.e., individual lifespan as well as historical context) in its interactions with people, relationships, and environments. Though the roles of individual characteristics and behavior are acknowledged within the bioecological model, consideration of larger contexts (e.g., culture, community, government) and interactions *between* contexts highlight this model's unique and important contribution to our current and future understandings of human health and illness. More broadly, the field of health psychology continues to shift toward the prioritization of *health promotion,* above and beyond illness treatment and prevention (Hilton & Johnston, 2017).

Figure 1



e. Interdisciplinary Content

The Health Psychology Program includes health research opportunities with different populations. Students also will have opportunities to collaborate with faculty members from a variety of departments and programs involved with health-related research and practice. These partnerships will provide great opportunities for students to engage in interdisciplinary research and education.

f. Respect for Diversity

The UNC Charlotte Health Psychology program strives to create an academic climate in which the dignity of all individuals is respected and maintained. We are committed to empowering individuals to explore and appreciate diversity that includes, but is not limited to ability/disability, age, culture, ethnicity, gender, language, race, religion, sexual orientation, socioeconomic status, weight/size and other attributes that may intersect to inform identity, which we recognize as being shaped both by individual historical experience as well as societal and organizational structures. Consistent with ethical research and practice in health psychology, we aim to create an inclusive community that is free from discrimination and harassment, and that promotes critical thinking that addresses stereotypes and inequalities through conscious reflection of our identities, beliefs, values, and actions. To foster this climate, we evaluate our progress through periodic assessment, respond to challenges through open discussion, and act in creative and compassionate ways.

g. Professional Conduct

The Health Psychology program adheres to the code of conduct established by the University of North Carolina at Charlotte and the Graduate School with respect to scholastic integrity, cheating, fabrication and falsification, multiple submissions, plagiarism, abuse of academic materials, and complicity in academic dishonesty (see Graduate Catalog). In addition, clinical students are expected to adhere to the ethical and professional standards established by the American Psychological Association. Students are expected to be familiar with this code.

h. Program Director Contact Information

Virginia Gil-Rivas, Ph.D.
Professor of Psychology and Health Psychology
Dept. of Psychological Science, Colvard 4006
University of North Carolina at Charlotte
9201 University City Boulevard
Charlotte, NC 28223-0001
Office: 704-687-1330
Email: vgilriva@uncc.edu
Webpage: http://healthpsych.uncc.edu/

i. Program Advisory Committee

The Health Psychology Program Advisory Committee consists of 9 faculty and 3 doctoral student members representing each area of concentration (program). Student members are elected by the Health Psychology graduate student body. The faculty members represent all concentration areas: 2 members from each of the 3 areas, 2 members representing interdisciplinary faculty, and the Director of the Health Psychology Program who chairs the committee. The faculty members are nominated by the Director of the Health Psychology Program after consultation with the different programs and interdisciplinary stakeholders.

The Health Psychology Program Advisory Committee typically meets twice per semester. Student representatives gather input from students in their respective concentration prior to each meeting and share feedback with the Health Psychology Program Advisory Committee.

The specific duties of the Health Psychology Program Committee include the following:

1. Recommends Program policy and procedures to the Program Director in an advisory role.
2. Ensures that Program policy and procedures are followed.
3. Recommends to the Program Director potential avenues for program development.

Program Advisory Committee 2020-2021

General concentration: Drs. Amy Canevello and Jeanette Bennett
Clinical concentration: Drs. Amy Peterman and Laura Armstrong
Community concentration: Drs. Jim Cook and Ryan Kilmer
Interdisciplinary faculty: Drs. Lyndon Abrams and Joanne Carman
Student representatives: Philip Zendels (general), Cecily Basquin (clinical), and Rachel Siegal (community)

2. Student Resources

A variety of campus resources are available to graduate students. The Graduate School provides considerable information and resources on issues such as housing, financial aid and competitive awards, and professional development.

The Graduate School: http://graduateschool.uncc.edu/

Funding Information: http://graduateschool.uncc.edu/funding

Student Resources: http://graduateschool.uncc.edu/current-students

Graduate Student Support: http://gradlife.uncc.edu/

a. Health Resources

The Center for Counseling and Psychological Services (CAPS) at UNCC provides 12 free sessions of individual counseling per academic year and an unlimited number of group therapy sessions. Of note, students in the clinical program/concentration may not seek services at CAPS *while* completing their practicum at CAPS (yet they may seek services prior to and after their practicum at CAPS). Additionally, some clinical students prefer to pursue counseling in the community even during the time they are not an active practicum student at CAPS. To help students access community mental health resources, current clinical students in the program have access to a list of providers who offer counseling to clinical students on a sliding scale/at low cost. The Student Health Center provides primary medical care, disease prevention, health education, wellness promotion, and various specialty services to eligible UNC Charlotte students (i.e., those with UNCC health insurance). See for FAQs about the Health Center and eligibility issues.

Health insurance is included as part of the Graduate Assistant Support Plan (GASP) funding, but students who are not receiving GASP support may purchase it. The cost of health insurance for the 2020-2021 academic year is $1,308.40.

b. Funding

i. Research Funding

To support graduate students' progress toward their milestone completion, the Health Psychology Program provides competitive research grant awards (up to $500 per milestone) to support students' research projects. These grants are designed to facilitate and improve students' research skills and scholarly productivity. Students and their primary mentor(s) need to submit the appropriate form to the Program Director. Of note, students can only apply for up to $500 per milestone project and funding is not distributed until the student has received IRB approval for their project. Any funding provided during the calendar year must be spent by the beginning of May of that academic year.

ii. Travel Funding

The program provides travel support (up to $500 per year) for students who are presenting their work at professional conferences. Please review travel guidelines as you consider requesting funding from the Health Psychology Program and submit the appropriate form to the Program Director.

Additionally, UNCC's Graduate & Professional Student Government (GPSG) offers up to $500 in travel funding each semester for students presenting at or attending conferences and symposia. Students are limited to $800 in travel funding per year. Students are required to submit a brief application via the GPSG website; applications are accepted on a first-come, first-serve basis. Application windows typically begin in

early September (Fall funding – covers conferences from Oct. 1- Dec. 31), November (Spring funding – covers conferences from Jan. 1- May 31), and April (Summer funding – covers conferences from June 1 – Sept. 31). Your HPGSA treasurer will remind you of this funding opportunity each semester and provide you with a link to the application.

Please visit this website for more detailed information about GPSG travel funding.

iii. Summer Funding

Finally, summer research fellowships are provided on a competitive basis (on average 3 fellowships are awarded per year) to support research (other than research related to programmatic milestones). In order to be eligible for the fellowship award, students must have successfully proposed their second year project and be in good programmatic standing. Additionally, students may not receive other sources of funding during the fellowship period (which is typically restricted to Summer 1 only). Fellowship recipients are selected by a faculty committee that reviews all student applications. This faculty committee is appointed by the Program Director on an annual basis. Relevant forms can be found on the program website and in the appendix.
Additionally, many students apply to work as graduate assistants during the summer. In that case, students are typically assigned to assist with one or more undergraduate courses (Summer 1 or 2) with the majority being online. In past years, students received $1000 per course. Others may be funded by their primary mentor(s) or other faculty members to conduct or assist with research. Please note, the program cannot guarantee summer funding to all students, but students are encouraged to seek support from their primary mentor(s) to identify potential funding sources for the summer.

iv. Graduate Assistant Support Program (GASP)

For doctoral students holding a teaching or research assistantship, an additional benefit is eligibility for tuition support via Graduate Assistant Support Program (GASP), depending on funding availability. These Central Funds, administered by the Graduate School, pay tuition and health insurance for eligible students for up to five years.Most students admitted to the Health Psychology program receive tuition remission and a stipend through the Graduate Assistant Support Program. As part of this process, The Program Director recommends students for funding to the Graduate School; the Graduate School extends an offer of funding support. Of note, the Graduate School tuition support does not include University Fees or Program/College Tuition Increments. For more details and information regarding eligibility, please visit this website.

c. Other Resources

i. Center for Graduate Life

Workshops and/consultation on professional writing, public speaking, curriculum vita development, and mindfulness have been presented by the Center for Graduate Life. Please visit their website for more information and upcoming events.

ii. HPGSA

The purpose of the Health Psychology Graduate Student Association (HPGSA) is to provide representation in the University of North Carolina at Charlotte (UNCC) Graduate and Professional Student Government (GPSG) and the greater UNCC organization for students in the Health Psychology PhD Program including the Clinical, Community, and General Health Psychology Program/Concentration. The HPGSA officers allot funds as provided by the GPSG or other sources and provide a forum for communication and organization for all members of the HPGSA, and between the HPGSA and the Health Psychology program and the HPGSA and GPSG. In past years, HPGSA has organized a variety of social, educational, and community service opportunities.

Members of HPGSA are persons who are (a) members in good academic standing at UNCC, (b) are currently enrolled (part or full-time) in the Doctoral program for Health Psychology at UNCC, with a focus in either Clinical, Community or General Psychology, and (c) have an interest in the development and representation of said organization. Students in the Health Psychology program are automatically part of the HPGSA. As a member of HPGSA you can apply for GPSG conference funding.

The HPGSA Officers:

All Health Psychology students are members of the HPGSA. At the end of each spring semester, students can run for and be elected to serve as the HPGSA officers.

The officer positions are: President, Vice President, Treasurer, Secretary, Senator, Philanthropy Chair, Social Chair, Social Media Chair, General concentration representative, Clinical concentration representative, and Community concentration representative. In 2020-2021, the Mentor Coordinator was asked to sit-in on HPGSA meetings to improve coordination between HPGSA officers and the HP mentor program.

The **President** leads HPGSA meetings and initiatives. The President is in close communication with the Health Psychology program director and each of the elected officers.

The **Vice President** serves as President if the President is unable to serve in their role. The Vice President coordinates the HPGSA aspects of interview day and supports the social chair in any social initiatives on interview day.

The **Treasurer** informs students about the GPSG funding options and serves as liaison between the GPSG treasurer and HPGSA members.

The **Secretary** takes meeting minutes. The secretary sends out communications as needed between HPGSA officers and others (e.g., other HPGSA members, the HP program, etc).

The **Senator** attends monthly GPSG meetings and updates the HPGSA on important news and changes happening at the university and graduate.

The **Philanthropy Chair** coordinates and provides information about volunteering opportunities.

The **Social Chair** organizes events to boost program morale, promote cohesion, and nurture the culture of the program.

The **Social Media Chair** promotes all HPGSA activities on social media channels, and uses available social media channels to boost program morale, promote cohesion, and nurture the culture of the program through social media.

The **Concentration Representatives** bring student(s)' concentration-specific feedback to HPGSA, the program advisory board, or the program as a whole, as needed and informed by the student(s). Concentration representatives advocate for students in general and specifically for the students in their concentration. Concentration representatives are also responsible for sharing information from Program Advisory Board meetings back with the student(s).

The **Mentor Coordinator** coordinates the mentor program (see section 2.iii. Student Mentoring Program). This involves matching incoming students with mentors, supporting mentors in their roles (e.g., holding a mentor training with mentors), supporting mentees (e.g., being available to answer mentee questions that mentors can't answer) and soliciting feedback to improve the mentor program (e.g., developing and disseminating annual surveys for mentors and mentees to complete and using the data to inform next year's efforts).

Additionally, In the spring semester first-year students elect a first-year representative to join HPGSA. The HPGSA President will reach out to all first-year students at the end of the fall semester, to solicit interest in this position.

iii. Student Mentoring Program

The Health Psychology Student Mentoring Program seeks to provide a source of social and academic support for incoming students by matching each new student with a more senior student to serve as a mentor for their first year in the HP program. A student mentor serves as a resource — a helping hand, a sounding board, a referral service — providing both personal and professional support for students in the early stages of their graduate program. The program is run by The Student Mentoring Committee, which consists of a Student Mentoring Coordinator, a Faculty Advisor, and the mentors (one per incoming student). The Student Mentoring Coordinator is elected by the Health Psychology students each Spring, and student mentors are selected over the summer to serve during the following academic year.

3. Program Faculty (Core and Auxiliary Faculty)

a. Core Faculty

Laura Armstrong	Psychological Science
Erin Basinger	Communication Studies
Jeanette M. Bennett	Psychological Science
Amy Canevello	Psychological Science
Andrew Case	Psychological Science
Maren Coffman	School of Nursing
Jim Cook	Psychological Science
Chris Davis	Communication Studies
George Demakis	Psychological Science
Mark Faust	Psychological Science
Alexia Galati	Psychological Science
Jane Gaultney	Psychological Science
Virginia Gil-Rivas	Psychological Science
Andrew Harver	Public Health Sciences
Rosemary L. Hopcroft	Sociology
Susan Johnson	Psychological Science
Ryan Kilmer	Psychological Science
Jennifer Langhinrichsen-Rohling	Psychological Science
Othelia Lee	Social Work
Sara Levens	Psychological Science
Doug Markant	Psychological Science
Rick McAnulty	Psychological Science
Erika Montanaro	Psychological Science
Amy Peterman	Psychological Science
Sharon Portwood	Public Health Sciences
Margaret M. Quinlan	Communication Studies
Charlie Reeve	Psychological Science
Victoria Scott	Psychological Science
Shannon Sullivan	Philosophy
Michael Turner	Kinesiology
Jennifer Webb	Psychological Science

b. Auxiliary Faculty

Lyndon Abrams	College of Education
Joanne Carman	Political Science and Public Administration
Shanti Kulkarni	Social Work
Julian Montoro-Rodriguez	Gerontology Program
Crystal Piper	Public Health Sciences
Lisa Rasmussen	Philosophy
Teresa Scheid	Sociology and Anthropology
Jan Warren-Findlow	Public Health Sciences

4. Advising/Mentoring

a. Primary Academic Advisor

The Health Psychology Program at UNCC utilizes a mentorship model and considers advising/mentoring to be an important component in promoting the student's professional development and success in the program. Students apply to work with a faculty member or members who will serve as the student's primary advisor (s). The advisor will be the chair of the advisory committee (see below). The primary advisor(s) will work with the student principally on research; however, the primary advisor(s) carries/carry other responsibilities outlined below. The primary advisor(s) must be (a) **core** member(s) of the Health Psychology Faculty and be a regular member of the UNC Charlotte Graduate Faculty.

The advisor(s) is/are important to the student's professional trajectory as the student's program of research will be shaped by whom they decide to work with. The advisor(s) is/are likely to be the person(s) who will know the student's work best and thus can be a professional advocate(s) for the student and help them excel in their own work during their graduate training.
Both students and primary mentors are encouraged to discuss expectations and their advising philosophy early on. Generally, mentoring/advising styles differ among faculty members and advising needs differ by students. For example, some students and their advisors utilize an individual development plan to help students structure their progress and advance in the program, while others choose to utilize a less structured approach. All members in the Health Psychology Program continue to collaboratively work on improving the advising/mentoring experience for faculty and students.
For more information, current faculty and students are encouraged to visit the shared google drive.

Co-advising

Some students are electing to be co-advised and are applying to work with two faculty members who will share advising responsibilities. Students and co-advisors are encouraged to discuss expectations and their advising philosophy early on.

Other Considerations

Given that most faculty members have a 9-month appointment, their availability over the summer may be limited. As such, students are encouraged to communicate with their advisor(s) about their expectations for the summer and plan accordingly.

Responsibilities of the Academic Advisor(s):

- The primary advisor(s) is/are the Chair(s) of the advisory committee (see below). As such, the advisor/s will lead and convene all committee meetings and provide final approval for all programmatic decisions and milestones.

- The primary advisor(s) has/have primary responsibility for guiding the student in their completion of the second year project.

- The primary advisor(s) will be the one who will direct the student's studies and regularly monitor their progress in the program.

- The primary advisor(s) is/are the point person(s) for all decisions regarding student's course work and qualifying comprehensive project. It is assumed that the primary advisor(s) will chair the student's dissertation committee.

Changing advisor(s)

Students may change primary academic advisors during their residence in the program. Students may receive support from the Ombudsperson as they consider this decision. It is expected that students will discuss the proposed change with their current advisor and the Director of the Health Psychology Program **prior** to seeking formal approval of this change. The Director will need to formally approve any changes in primary advisor(s).

b. Advisory Committee

In addition to applying to work with (a) primary advisor(s), students will need to assemble an advisory committee by the end of the Fall semester (and no later than the beginning of the Spring semester of their first year) in the Program. Of note, primary advisor(s) should be involved in assembling the advisory committee. Students and the primary advisor(s) should discuss professional and project goals as well as general expectations and responsibilities with potential committee members prior to asking them to join the committee. The Program Director must formally review and accept the composition of each student's committee after the student has submitted the Student Advisory Committee Approval Form (see Appendix). At a minimum, **students are expected to meet with their advisory committee once per academic year** to discuss their progress in the program.

Composition of the Advisory Committee:

- The advisory committee includes at a minimum three members: two graduate faculty members with training in Psychology and one interdisciplinary faculty member from disciplines other than psychology (e.g., public health, nursing, sociology, communication studies, etc.). The interdisciplinary member does not need to be formally affiliated with the Health Psychology Program; however, they should have Graduate Faculty status at UNC Charlotte.

Responsibilities of the Advisory Committee:

- In collaboration with your primary advisor(s), your committee will guide you in selecting graduate courses that will meet Program requirements as well as help you reach your professional goals. Your advisory committee can be particularly helpful in the process of selecting interdisciplinary courses.

- In collaboration with your primary advisor(s), members of your advisory committee will review your academic transcripts to determine what courses might be eligible for transfer.

- The primary advisor(s) along with the advisory committee will continuously evaluate the student's progress in the Program as well as their performance on programmatic milestone projects. The primary advisor(s) will act as the point person for all final decisions, that is, the primary advisor(s) will coordinate all final decisions with the advisory committee on the student's progress and on final evaluations of students' project milestones., that is, the primary advisor(s) will coordinate all final decisions with the advisory committee on the student's progress and on final evaluations of students' project milestones.

Students may change the members of their advisory committee during their residence in the program. The student should discuss the proposed change with his or her current advisor and the Director of the Health Psychology Program **prior** to seeking formal approval of this change. Students should communicate this decision to the committee member they are seeking to replace. A new Student Advisory Committee form (See Appendix) will need to be submitted to the Program Director for her/his formal approval of this change.

c. Dissertation Committee

You will need to assemble a dissertation committee upon successful completion of your Comprehensive (Qualifying) Project. Your primary advisor(s) typically serve as the (co-)chair(s) of your dissertation committee. Likewise, members of your advisory committee may also serve as members of your dissertation committee. However, you are free to form a dissertation committee that does not include members of your advisory committee. You need to consult with your primary advisor(s) regarding the composition of this committee. Please note that all members of your dissertation committee need to be regular members of the UNC Charlotte Graduate Faculty. The composition of your dissertation committee needs to be approved by the Director of the Health Psychology Program and by the Graduate School.

Composition of the Dissertation Committee

- The dissertation committee will consist of at least four Graduate Faculty members, one of whom is appointed by the Dean of the Graduate School as the Graduate Faculty representative.

- The (co-)chair(s) of the dissertation committee must be (a) **core** member(s) of the Health Psychology Faculty and be (a) regular member(s) of the Graduate Faculty at UNC Charlotte.

Responsibilities of the Dissertation Committee Chair:

- The (co-)chair(s) of the dissertation committee will take the lead in working with you on: 1) the development of your research project; 2) the development of your proposal; 3) implementation of your dissertation project; and 4) the completion of the written component of your dissertation. The (co-)chair(s) will regularly monitor your progress with dissertation-related work and provide feedback on your progress.

- The (co-)chair(s) of the committee will lead and convene all dissertation committee meetings and provide final approval of your work.

- The (co-)chair(s) is/are the point person(s) for all decisions regarding your dissertation work and final written document.

Responsibilities of the Dissertation Committee Members:

- In collaboration with the (co-)chair(s) of your committee, committee members will assist you in the development of your dissertation proposal and completion of the project.

- The members of the dissertation committee will be involved in reviewing the dissertation work and issuing recommendations regarding your progress and successful completion of your dissertation after that work has been approved by the (co-)chair(s) of your committee.

5. Program Requirements

a. Minimal program requirements for successful completion

- Students are admitted for full-time study.

- Students are required to maintain continuous enrollment (**at least 3 credit hours per semester**; fall and spring). Students who fail to maintain ongoing enrollment will need to apply for reinstatement.

- Required Graduate Hours:

    - General concentration/program: At least 78 post baccalaureate hours.
    - Clinical concentration/program: At least 88 post baccalaureate hours.
    - Community concentration/program: At least 78 post baccalaureate hours.

- All coursework taken at UNC Charlotte that counts toward the Ph.D. is at the 6000 level or above. The majority of the coursework is at the 8000 level.
- Students will develop a plan of study with their advisory committee.
- Successful completion of a second-year research project (students who have completed a master's thesis prior to entering the program can request that their second-year research project be waived; see below for details).
- Successful completion of one practicum for General students and two practica (or 6 credits) for Community students.
- Successful completion of a Comprehensive (Qualifying) Project prior to being admitted to candidacy. Students in the Clinical Program/Concentration are also required to complete a Comprehensive Clinical Exam.
- Successful completion of a dissertation project.
- Successful completion of a year-long pre-doctoral clinical internship (Clinical Concentration/Program only).

b. Minimal levels of acceptable achievement

- A grade of "B" or better is the minimal level of achievement for courses designated as "core" by the Program and the student's area of concentration/program. Students who are unable to obtain this level of achievement will be required to re-take that course. If a student is unable to meet the grade requirement after the second attempt, s/he will be discharged from the Program. In addition, students are allowed to **withdraw from a "core" course on one occasion**. Please note that the Graduate school guidelines allow students to repeat a maximum of two courses in which the student was assigned a grade of C or U. A given course may be repeated one time only.
- For students in the clinical concentration/program the minimal level of achievement on each of their practicum placements is a rating of at least "Satisfactory" on the final, overall evaluation item (i.e., —Overall performance during this evaluation period). If the overall rating is less than "Satisfactory", the DCT will meet with the site clinical supervisor, the faculty practicum instructor and the student to discuss the specific areas of deficiency and to develop an individualized plan to address them. One of the licensed clinical faculty members will be chosen to work individually and intensively with the student on the problem areas. Repetition of clinical coursework may be required. The need for continued remedial work will be evaluated at the end of each subsequent semester or more frequently if requested by the student. The clinical faculty will discuss the student's progress in the end-of-semester student evaluation meeting and will jointly determine readiness to continue practicum.

- Termination may be appealed to the Program Director and the Dean of the Graduate School.

The procedures outlined above do not replace the Graduate School guidelines regarding grade expectations for students. Specifically, students who earn 2 marginal ("C") grades or a grade of Unsatisfactory in any graduate coursework will be suspended from the University. A student who is suspended because of grades is ineligible to register in any semester or summer session unless properly reinstated (see Graduate Catalog). In addition, students must successfully complete all program milestones in order to meet the program requirements.

c. Professional competency

Procedures for students who do not meet professional practice competency standards

Program faculty are responsible for the monitoring and evaluation of student performance in all areas and to ensure appropriate professional development. Procedures for dealing with students' performances in areas such as meeting program milestones and coursework are discussed in the section below. The current procedures refer only to student's performance in professional practice areas such as practicum, teaching, research assistantship, etc. A student who does not perform competently (i.e., appropriately and effectively) in these areas may be discharged from the Program. In the situation in which a faculty member or any other supervisor (i.e., clinical, teaching, etc.) believes this to be the case, the procedures listed below will be followed.

- The faculty member will meet with the student to share/discuss concerns and determine what additional follow-up (if any) is needed.
- The faculty member will meet with the Program Director to advise and inform them of the situation. For issues relevant to clinical practicum work, the faculty member should first meet with the Director of Clinical Training (DCT).
- Program Director and/or DCT will consult with other faculty as necessary, including the student's advisor, to obtain information about the student's performance. For a clinical student, the instructor of Practicum in Clinical Psychology will also be involved. The DCT and/or Program Director will also meet with the student to obtain additional information and the student's perspective on the situation.
- In consultation with relevant faculty and the student, the Program Director and/or DCT will develop a written report based on all the information presented. This might include one or more of the following:
    - Develop, plan, and implement a remediation program with benchmarks for success/progress.
    - Referral for appropriate professional assistance and/or evaluation.

- Recommend a leave of absence from the program to resolve the problem (usually one semester but no longer than 9 month/2 semesters).
- If the issue warrants termination from the Program, the Program Director will follow the termination procedures described in the following section.

- At the end of the remediation program or leave of absence, the Program Director and/or DCT will gather relevant information, meet with the student and other faculty to determine if the problem has been resolved, if the student met the benchmarks specified for improvement, and, ultimately, whether they are able to perform competently. If, based on program faculty input and the judgment of the Program Director, the student is still not able to perform as expected the Director will recommend the student's termination to the Graduate School (see Termination procedures).

- If, at any point, during this process, the student is unable or unwilling to comply with the plan for remediation/rehabilitation, the Program Director may initiate the termination procedures.

d. Research expectations:

Research: The Health Psychology Program places a strong emphasis on research and expects that students will be actively involved in research throughout their enrollment in the program. Of note, research involvement may vary by primary advisor(s)/research labs as well as students' professional interests and goals. As such, primary advisor(s), students, and other research collaborators are encouraged to openly discuss research expectations.

e. Programmatic Expectations regarding Affiliation with Professional Associations

Professional Involvement: Membership by students in professional organizations is strongly encouraged. There are a variety of professional organizations such as Divisions 38 (Society for Health Psychology), 50 (Addictions), 54 (Pediatric Psychology), 27 (Society for Community Research and Action) of the American Psychological Association, Society of Behavioral Medicine, and The American Psychological Society among others. Student travel funds may be available for travel to such professional conferences, especially if you are an author on a paper presented at that conference. The request for travel funds form is located in the Appendix.

f. Practicum Expectations:

Students are required to complete a practicum placement during their training in the Program. While the number and nature of practicum experiences differ by concentration, practicum placements are generally thought to provide students with the opportunity to gain experience working with a multidisciplinary team in a research, clinical, or community setting outside of the Health Psychology Program. Specific guidelines for the practicum experience for each concentration/program are provided in the concentration-specific sections.

Conduct on practicum

Health Psychology students are expected to behave in a legal and ethical manner during all aspects of their practicum training. Students are expected to adhere to the ethical and professional guidelines established by UNC Charlotte and the American Psychological Association. Examples of potentially illegal, unethical, or inappropriate behaviors on practicum include the following:

- Failure to meet practicum responsibilities.
- Withdrawing from a practicum site without permission from the Program Director or supervising faculty.
- Violating ethical standards for research and/or practice.
- Insufficient and/or harmful application of psychological theory or practice.
- Significant deficiencies in professional judgment.

The consequences of such behavior may range from a disciplinary letter from the Program to a recommendation to the Graduate School for termination.

g. Time Limits and Programmatic Milestones

Time limits for for degree completion

1. Students are expected to complete their course work within the timeline described below.

2. All students are expected to complete certain programmatic milestones to demonstrate satisfactory progress toward graduation (see below).

3. Students must meet benchmark requirements each year to maintain their status as a doctoral student.

4. Students must successfully defend their dissertation within **nine years** from admission in accordance with graduate school guidelines).

5. Course Revalidation
    - Students who exceed the nine-year timeline will need to apply for course revalidation. The time limit cannot be paused, even if the student takes an approved leave of absence. Course revalidation involves obtaining a grade of “B” or better on the final exam or project for the course in question. Students in the clinical concentration will also need to demonstrate proficiency in administration of relevant tests (e.g., WAIS, MMPI, etc.) as part of the revalidation of assessment courses.
    - Please note that no more than 25% of the courses on a student’s program of study may be revalidated, and no course older than ten years may be revalidated. Courses that are older than 10 years will

need to be retaken. All courses listed on the candidacy form cannot be older than 8 years at the time of graduation

Timeline for completion of milestones

- **2nd year project/MA thesis:** Students defend their 2nd year project/MA thesis by the end of the fall semester in the 3rd year of training
    - Primary advisor(s) and students should begin discussing/planning for the second year project during the spring of the student's first semester in the program
- **Comprehensive Qualifying Project (Qualifying comps):** Students defend their qualifying comps by the end of the fall semester in the 4th year of training
- **Clinical Comprehensive Exam (Clinical comps):** Students typically complete their clinical comps at the end of the spring semester in their 3rd year of training but no later than at the end of the spring semester in their 4th year
- **Dissertation:**
    - Propose by the end of the fall semester in the 5th year (Clinical students applying for internship need to propose no later than October 15th)
    - Defend by the end of the spring semester in the 5th year (Clinical students may defend their dissertation at the end of their 6th year while on internship)

NOTE:

- This timeline outlines the program's expectations of milestone and degree completion. Students and advisor(s) should evaluate the timeline on an individual basis to determine if an accelerated timeline is in the best interest of a student.
- To prevent the spread of COVID-19, all milestone proposal meetings and presentations are held remotely until further notifications by the university. Students will send out a video conferencing link (e.g., zoom, webex, etc.) at least two weeks prior to their proposal/defense meeting. If the university permits in-person meetings, students are in charge of suggesting this format; however, advisors and committee members are free to decline, and proposal/defense meetings will be held remotely. If the meeting takes place in person, students and faculty members need to wear a face covering and safety precautions should be followed.
- If students do not meet the required timeline outline above, students and advisors need to submit a formal letter to the Program Director requesting a 6-month extension (once per milestone). If this extension is not sufficient, students will be placed on programmatic probation. All requests will be reviewed by the Program Director, the student's academic advisor, and the concentration coordinator.
- The timeline for completion of programmatic milestones will be adjusted based on students' academic accomplishments at program entry. Students entering the Program with a graduate degree in psychology or related discipline and who have successfully completed a thesis should discuss the timeline with their advisor(s) and adjust it accordingly.

- Students have priority for funding during their first 4 years of their tenure in the program assuming that they meet eligibility requirements (GPA and enrollment). As such, students are encouraged to work with their advisor(s) in identifying funding opportunities beyond the fourth year as funding provided by the program will depend on availability.

i. Second Year Research Project

The second year project is meant to immerse students in a practical research experience that will help them develop skills to conduct independent research projects. Past and current students collected data, used existing data from their advisor(s)' research lab, or have used public datasets.Students are expected to develop and carry out this project under close supervision from their primary academic advisor(s). Completion of this project entails:

1) **Development of a research proposal** under the supervision of the primary advisor(s). The proposal should include the following sections: a) review of the literature; b) research questions or hypotheses; 3) methods; and 4) plan of analysis.

2) **A formal proposal meeting** with the advisory committee that includes a brief presentation of the proposed project. Presentations should summarize the supporting literature and the potential contribution of the proposed work, as well as provide detail regarding the planned methodology. Of note, expectations around the proposal presentation (format, duration, etc.) vary by advisor(s) and advisory committees. As such, advisor(s) need to communicate their expectations to students at least one month prior to the proposal meeting, noting the expected duration of the presentation, the format, and any other considerations.

3) **A manuscript that** follows the format of typical empirical articles in psychology and should be turned into your primary advisor and members of your advisory committee. The manuscript should include the following sections: a) review of the literature; b) research questions or hypotheses; c) methods; d) plan of analysis; e) results; and f) discussion. The manuscript should be sent to the member of your advisory committee at least <u>two weeks prior to your formal defense</u>.

4) **A defense of your project which includes an oral presentation in front of your advisory committee**. The presentation is expected to be approximately 30 minutes in length and should provide a brief overview of the project, summarize the main findings of the study, and highlight contributions to Health Psychology. As with the proposal, expectations around the presentation (format, duration, content, etc.) vary by advisor(s) and advisory committees. As such, advisors need to communicate their expectations to students at least one month prior to the proposal meeting, including the expected duration of the presentation, the format, and any other considerations.

5) Students co-enrolled in the M.A Program in Psychology at UNCC who wish to count their second year project toward their M.A degree need to follow additional formatting

and submission guidelines. Please review the information provided by the graduate school for more information.

Additional information:
Requirements for a second year project can be waived if the student has successfully defended a research-oriented graduate thesis in his/her previous academic work that meets program expectations.

Evaluation:
Each member of the student's advisory committee is required to evaluate the student's project as part of the Program's Evaluation of Student Learning Outcomes (see the Appendix). The completed evaluations are submitted to the program Director and shared with the student. **Students are expected to achieve a score of acceptable or better** in each of the domains evaluated. Written revisions or a repeat of the oral presentation will be required if this score is not achieved.

ii. Comprehensive Qualifying Project (Qualifying comps)

The Qualifying Project has two main parts, each with written and oral components.

PART I.
Written Component – Qualifying Project Portfolio: The initial written portion of the Qualifying Project will be a *portfolio*, consisting of the following elements:

1. *The student's second-year project or M.A. thesis.* Equivalent Master's projects from other programs or institutions may be considered for this element if they have been accepted and approved by the student's advisory committee and the Health Psychology Program Director as consistent with the second-year projects or M.A. theses completed via this program. While the second-year project or M.A. thesis reflects a separate milestone project, it is included here as a relevant element to the framing of students' interests and trajectory.

2. *One or more first-authored, peer-reviewed, conference presentations at a national or international conference of a professional society, association, or group*. Posters and all forms of oral presentations (i.e., paper presentations, symposia, and roundtables) can meet this criterion, provided the student is first author or chair. Regional (i.e., meetings of the southeast region), local (e.g., Mecklenburg County, Charlotte, local system-focused), or on-campus (e.g., UNC Charlotte research symposia, NC Psychological Association) conference presentations, while encouraged, do not meet this criterion. The hypothesis/es for this conference poster or oral presentation must be unique from the MA thesis.

3. *One or more of the following written products, completed in their time at UNC Charlotte:*
    a. *One or more first- or second-authored, peer-reviewed manuscript submissions.* Second-authored works are only allowable if the student's

advisor (or another advisory committee member) is first author and can attest to the student's substantive contribution to the project as well as the manuscript.

b. *One or more student-led and developed external research grant proposal submissions.* Proposals submitted to federal, state, and foundation funding sources are allowable.
c. *One or more student-led program evaluations, including the submission of the final report.*

Note: To meet criteria for the Qualifying Project's written component, elements #1-3 must reflect unique efforts and contributions to projects that were conducted during their time at UNC Charlotte. These products cannot simply reflect the requirements of a course or practicum placement. For a product to meet this criterion, it must clearly be outside the requirements of a class or the specific scope of work for a practicum placement. In addition, if the manuscript option is used, its hypothesis/ses must be unique from the MA thesis and conference presentation. For example, a student cannot "count" a conference presentation or manuscript submission that simply reflects the work of her or his M.A. Thesis or 2nd-Year Project. The products can grow out of the same project or effort, but they must reflect different or expanded hypotheses, analyses, findings, and/or implications. In addition, the student cannot use products that were initiated prior to enrollment in the program.

Oral Component – Qualifying Project Proposal Meeting: Consistent with other programmatic milestones, the qualifying project has required oral presentations. For Part I, students will have a Proposal Meeting with their committees. Students and their advisory committees will agree upon the approach to the oral component of the proposal – some may prefer a formal presentation, while others may find a less-formal discussion with one's committee more suitable.

For this *Qualifying Project Proposal*, students will (1) provide their committee with a copy of their curriculum vitae; (2) identify which of their scholarly products will allow them to demonstrate that the portfolio criteria have been met and share copies of each; (3) draft a brief description of each product (summarizing the student's role as well as, e.g., the effort's research questions, sample, key findings, contribution); (4) address any comments or questions the committee may have about the third element of part I of the qualifying project; and (5) discuss broadly how she or he plans to approach the Statement of Research (e.g., what they view as well-suited ways of framing their work and its conceptual foundation). The expectations for the Statement of Research are described below (under Part II).

Evaluation:
The student's committee will need to agree unanimously that the criteria for the written component have been met; if they do, the student will move forward in drafting the formal Statement of Research. If the committee does not agree that

the criteria have been met, they will outline the specific products or steps necessary for the student to do so (and for the group to convene again for another proposal meeting).

PART II.

The written and oral components for Part II of the Qualifying Project are as follows:

Written Component – Qualifying Project Portfolio: In addition to the products (#s 1-3) identified via Part I above, students will frame their Qualifying Project Portfolio by developing:

> *A statement of research*, delineating the student's specific research interests, describing the scholarly products completed, and integrating discussion of the ways in which the student's health psychology training (broadly defined) is reflected in her or his professional work. This statement is to be descriptive and reflective, outlining the student's program of research, the trajectory the student is pursuing, the steps the student has taken, relevant conceptual frameworks, and the like. This statement can draw on students' graduate training experiences more broadly, including coursework / class projects, practica, and research assistantships. Contextualized within health psychology, this statement should include an explicit focus on the nature and focus of the student's prior and current research, as well as its future directions (e.g., dissertation preview, other future directions) and limitations. This statement should be no more than 5 single-spaced pages (with 12-point font, 1-inch margins).

Note: As students draft their statement, they may seek counsel from their mentor(s)/advisor(s) as they desire. However, this guidance and support should be limited to discussions guiding their approach, talking through strategies for framing one's interests and activities, and providing examples. **It is expected that mentors, advisors, and committee members will not read and provide feedback on drafts of the statement as it is developing** – the statement should reflect the student's voice.
Oral Component – Qualifying Project Defense: Student presentations (estimated at 30-45 minutes) should be an outgrowth of the Statement of Research. Students will provide an integrative overview of their program of research, the central conceptual frameworks relevant to their work, current and developing projects, and future directions. **It is expected that Qualifying Project Defenses will occur within a maximum of 3 months of the Proposal Meeting**.

Note: The new guidelines apply to students joining the program in the **fall of 2018**. Students who entered the program prior to fall of 2018 may choose to complete their comprehensive/qualifying project utilizing the "old" or the "new" format. This decision should be made in consultation with the advisor(s) and advisory committee.

Evaluation:

Each member of the student's advisory committee is required to evaluate the student's project as part of Program's Evaluation of Student Learning Outcomes (see Appendix). Students should receive a rating of acceptable or better in order to successfully complete their Qualifying Project. The completed evaluations are submitted to the Program Director. Students are expected to achieve a score of acceptable or better in each of the domains evaluated as part of the project. Students who are unable to meet expectations will be required to resubmit the required documents or re-schedule their presentation. Students need to schedule their second attempt within one month of the original attempt. Failure to successfully defend the qualifying project after the second attempt will result in programmatic termination.
In addition, the Qualifying Examination form should be submitted to the Graduate School upon completion of the formal completion of the qualifying project.

iii. Clinical Comprehensive Exam (Clinical students only)

Please Note: Although the basic requirements will be very similar to those below, a subcommittee of faculty and students is updating and clarifying the guidelines for the completion of the clinical comprehensive examination. The revision will be vetted by the clinical students and approved by the clinical faculty by early in the Spring 2021 semester. Students who will be presenting their clinical comprehensive exam (i.e., clinical comps) in Spring 2021 should utilize the guidelines provided in this handbook.

Clinical case presentations are important activities in the professional development of clinical health psychologists. Such presentations serve to provide the student an opportunity to integrate academic and clinical work and to sharpen their conceptualization of cases and communication skills. Moreover, the case presentation provides the faculty with a concise and standardized format to evaluate students' clinical competencies. To these ends, the clinical faculty requires that all clinical students give a formal case presentation when they have completed all clinical courses. This will typically be completed at the end of spring term of a student's third year. If there are practicum site-related or structural issues that limit the feasibility of completing clinical comps by the end of third year, students and the DCT will collaborate in revising the timeline for completion as feasible. This milestone must be completed by the end of the Spring semester of the student's fourth year. Successful completion of clinical comps is one of the requirements for applying for an internship. The case presentation will be on a current or past client, may be on a therapy or assessment case, and will consist of a written paper and an oral presentation. Details about the timing, format, evaluation process, etc. are detailed below.

Selecting a Case

Students should select a case that has been interesting, challenging, or has facilitated their learning in some way. Students may select a case where something went wrong or where they would have done something different—in other words, the success of their intervention is not necessarily relevant to their performance on the case presentation. What is important, however, is that students are able to reason about difficulties or challenges in a professional and psychologically sophisticated manner. Students may

benefit from selecting a case that will provide them with the opportunity to reasonably address all the issues detailed in the section below. Because not all clients are ideal for presentation, students should think about the appropriateness of cases early in practicum. For the case selected, students should provide evidence of how their work demonstrates clinical competency such as a video or audio-tape recordings of an intake or therapy session(s). Students are expected to select a segment or segments that fit with and support their presentation; for instance, they may choose a clip that demonstrates their ability to use a technique or procedure that is consistent with their case conceptualization. Videotape or audiotape is necessary as this allows the best and most efficient method to evaluate clinical competency. Ideally, students will obtain sufficient video or audio evidence to demonstrate competency; this should be made available to evaluators before the oral presentation for their review. During the presentation, only brief select clip(s) should be presented. In addition to video or audio, other supporting indicators of competency such a completed psychological report, chart notes, etc. may also be included. Because this information will be shared with and discussed with faculty during the oral presentation, students are required to obtain the client's signed permission to release information for educational (non-therapeutic) purposes. Students should work with their site supervisor, as well as the instructor of PSYC 8450, to help them select an appropriate case. Portions of the case may have been previously presented in a class or on practicum.

Please note that if, as a last resort, you are not able to get video or audio-tape, there are other options for demonstrating clinical competencies (e.g., a standardized patient) that can be explored. If this is done, the comps will be adapted on a case-by-case basis.

Evaluators

At least two clinical program faculty members will serve as evaluators for each case presentation.

Written Paper/Portfolio

The APA-style finished paper should be approximately 25 pages in length, not counting references and appendices. The paper should address each of the domains below, but an emphasis will be on students' reasoning, case conceptualization, and ability to integrate their clinical work with the relevant research. Students' ability to use a biopsychosocial model and adopt an interdisciplinary perspective is a key component of a successful case presentation. As might be expected, there will be quite a bit of variability across papers given the differences in student style, practicum training site, supervisor, client selected, etc. The paper is due at least one week before the case presentation. Supporting documentation, including the video/audio tape should also be made available at that time or earlier if it is lengthy. Students should gain approval from the course instructor about the appropriateness of their case before proceeding.

To help structure the paper a suggested outline is presented below. While students may choose to present information in a different sequence and subheadings are not

required, students are expected to address each of the following topics. The Clinical Comps evaluation sheet and grading rubric can be found in the Appendix of this Handbook.

1. Demographics (students should conceal the client's name and other identifying information so that he or she can not be identified)

2. Presenting complaints and relevant psychosocial history

3. Assessments (e.g., cognitive or personality tests, behavioral observations, etc.).

4. Case formulation, conceptualization, and theoretical considerations

5. Treatment rationale, intervention approach, course of treatment, and outcome

6. Mechanisms of, and obstacles to, change

7. Scientific applications and considerations (e.g., use of empirically supported treatments)

8. Health psychology issues, applications, and considerations

9. Application of the biopsychosocial model

10. Interdisciplinary perspectives and considerations

11. Cultural and diversity issues

12. Ethical issues and considerations

13. Use of supervision throughout the treatment process

14. Take home points and what was learned through this case

15. Appendix of supporting materials (e.g., treatment plan, psychological reports, case notes, etc.). These do not count toward the approximate 25-page length.

Oral Presentation

Once students are wanting to schedule their clinical comps presentation (in accordance with the expected timeline outlined above), they will notify the DCT. The DCT will then contact clinical faculty members and identify two evaluators. The student and the evaluators will schedule the date of the oral presentation. If possible, the DCT will attend the oral presentation.

Students should schedule a two hour block of time for their clinical comps defense meeting. The entire oral presentation should last about 90 minutes and include a brief case presentation followed by a question-and-answer session. Students should provide a brief overview of the case and their therapeutic approach and then be prepared to critically discuss the case with faculty evaluators. The presentation should take approximately 45 minutes, including video or audio-presentation or other demonstration of competency, with the remainder of time devoted to questions. Please note that not all the video or audiotape submitted needs to be presented at this meeting as there would not be enough time-- only select clips are necessary. A central purpose of the oral presentation is to give students practice “thinking on their feet” and engaging in clinical and scholarly dialogue with peers and faculty. Thus, students should allow time for questions and discussion. It will be important to be able to consider students’ cases from different clinical or theoretical perspectives.

After approximately 90 - 100 minutes of presentation and discussion, the faculty evaluators will meet without the student to determine if s/he passes the milestone and if revisions are required for the paper. Similar to other milestone defense meetings, the student will return to the room to receive the faculty feedback.

Evaluation

The paper and oral presentation will be evaluated on several dimensions, including organization, clarity of rationale and description of the case, use of data to support inferences, integration of theory and scientific data with case description, presentation style, and response to questions.

Each evaluator will provide an assessment of the student’s work. If both evaluators score the case presentation as a below “satisfactory,” this will be considered a failed case presentation. In that case, the student will need to complete another clinical case presentation and possibly work on remedial skills. Failure to do so or continued difficulties on practicum may result in being held back from applying for internship.

Portions of the presentation may have been previously presented in class and/or may have been counted as part of the grade in the students’ practicum courses. In such cases, students are expected to work with and respond to feedback to improve the case study.

Modifications to the Clinical Comprehensive Project to Accomodate an Assessment Focused Case Presentation

1) Demographics: This section will not be any different.

2) Presenting complaints and relevant psychosocial history: This section also will not change.

3) Assessment: This section will include the type of assessments conducted and why each test was selected as opposed to other tests.

4) Case formulation, case conceptualization and theoretical considerations: This section will be similar to the summary and conclusion section from the neuropsychological report, which will include a summary of the test results, clinical interview and behavioral observations. It will include any relevant diagnoses and how I arrived at these diagnoses. It will also include how other diagnoses were ruled out. If there is a specific neurocognitive profile consistent with the patient's medical/psychological history, this will be discussed and supported with literature, as well as compared to the patient's performance on testing.

5) Intervention approach, course of treatment, and outcomes: This section will consist of recommendations for both the child/adolescent and family (depending on the patient's age). These will include typical neuropsychological/educational recommendations, as well as recommendations for interventions that could be implemented in therapy. Depending on the patient's age, this may include both child-focused and parent interventions. This section will also include the recommended course of treatment (e.g., how many sessions) and expected outcomes, which will be based on prior literature.

6) Mechanisms of, and obstacles to, change: This section will consist of hypothetical/expected mechanisms and obstacles to change. These will be based on typical mechanisms and obstacles, as well as considerations based on details of the patient. This may include barriers with both the child/adolescent and parent.

7) Scientific applications and considerations (e.g., use of empirically supported treatments): This section will overlap with section 3 in some ways, as I will discuss in more detail why the chosen tests were included as well as the empirical support of each test.

8) Health psychology issues, applications, and considerations: This section will not differ.

9) Applications of the biopsychosocial model: This section will not differ.

10) Interdisciplinary perspectives and considerations: This section will not differ much from the therapy-based clinical comps, but will include medical issues and education considerations.

The following sections will remain consistent with a therapy-based comps project; however, they will also address assessment-related issues (e.g., ethical considerations within neuropsychological assessment).

11) Cultural/diversity issues
12) Ethical issues
13) Use of supervision

14) Take home points

Supporting materials will include audio recording of the clinical interview and feedback, as well as the de-identified neuropsychological report.

iv. Dissertation

The doctoral dissertation is meant to be a scholarly document reporting on an empirical contribution to the knowledge base in health psychology, broadly defined. For the dissertation, students are expected to:

a) Play a significant role in the development of an important question or set of questions in their selected area of research.

b) Be actively involved in the process of designing a study, collecting data, and/or developing measurement/analytic procedures to address the question(s) of interest. Under most circumstances, data collection will be designed specifically for the dissertation project.

The use of pre-existing data from large scale or longitudinal studies may be appropriate in some cases. Specifically, this option is acceptable for students who have been involved in all stages of one or more research projects from start to finish, including formulating the research questions and original data collection, at some point in their graduate training.

When students use data from a pre-existing data set, they are still expected to play an independent role in formulating novel research questions and in designing or facilitating new measurement or analytic procedures appropriate to the topic (e.g., the project must involve more than a simple data analysis involving existing variables).

Whether or not their dissertation grows out of existing data, dissertation candidates must demonstrate doctoral level competency in writing, conceptualizing well-targeted research questions, planning and conducting appropriate analyses, and communicating the potential meaning, contribution(s) and implications of their findings.

Acceptable models for the final dissertation are:

1. Traditional dissertation with an in depth literature review and detail throughout the document. For detailed guidelines, for example, see Heppner & Heppner's (2003) Writing and Publishing Your Thesis, Dissertation, and Research: A Guide for Students in the Helping Professions.

2. A document that presents multiple (at least 2) publication length manuscripts (25-35 pages) that represent a coherent program of research, with an integrative Introduction and Discussion. It is acceptable for some of these manuscripts to have been submitted or accepted for publication prior to the dissertation defense.

An example of option 2 could include the following chapters:

Chapter 1 Introduction, literature review, specific aims

Chapter 2 Overall methods of entire dissertation

Chapter 3 Manuscript 1. This manuscript should be submission ready and would include an Introduction, Aims/hypotheses, Methods, Results, Discussion, References, and Tables/Figures, etc.

Chapter 4 Manuscript 2. This manuscript should be submission ready and would include an Introduction, Aims/hypotheses, Methods, Results, Discussion, References, and Tables/Figures, etc.

Chapter 5 Discussion. This would be relatively short and should include integration of the findings of the manuscript studies, limitations, and future directions.

References

Appendices

All dissertations need to be formatted according to the UNC Charlotte Graduate School guidelines for Thesis and Dissertations.

Guidelines for Dissertation Defenses

Prior to moving forward with the dissertation project, students should complete the forms required by the Graduate School. In addition, the Graduate School has provided the following guidelines for dissertation defenses:

1. *Timeline for submitting dissertation document to faculty:* Students should provide their dissertation committee with a copy of their dissertation **3 weeks prior** to the date of the defense.

2. *Doctoral dissertation defense announcement*: The Graduate School's policy requires that dissertation defenses be open to the University Community. Students are expected to forward a dissertation announcement to the Program Director **at least two weeks prior** to the date of the defense for dissemination. The announcement should include the following elements:

   Student's Full Name:
   Date of Defense:
   Location of Defense:
   Time of Defense:
   Title of Dissertation:
   Dissertation Committee Chair:
   Abstract (brief):

3. *Time management of dissertation defenses:* Dissertation defenses should provide the candidate with sufficient time to make his/her presentation and provide ample opportunity for all participants in the defense to ask relevant questions. Thus, students are expected to **block 2 to 3 hours for the defense**. The dissertation defense is considered the final examination on the way to receiving a doctoral degree. It is important that all faculty involved have an ample opportunity to judge the candidate's knowledge on the topic of the dissertation.

4. *Dissertation formatting review:* All doctoral dissertations must meet the Graduate School formatting requirements and follow all necessary steps. The Graduate School also requires that all doctoral students make an appointment to meet with a dissertation reviewer prior to the final defense so that any formatting problems can be identified.

Evaluation of the dissertation project

Each member of the student's dissertation committee is required to evaluate the student's project as part of the Program's Evaluation of Learning Outcomes (see the Appendix for scoring rubrics). The completed evaluations are submitted to the Program Director. Students are expected to achieve a score of acceptable or better in each of the domains evaluated. If members of the student's committee do not unanimously agree that the student's demonstrated at least "acceptable" performance in all domains, written revisions and/or a repetition of the oral defense will be required.

Degree Requirements

The doctoral degree in Health Psychology is conferred by the University after the student has demonstrated outstanding scholarship in an approved program of study. Candidates must satisfy all University degree requirements in addition to requirements and all standards established by the HPSY Program. Students are required to be enrolled during the semester they wish to graduate. Please consult UNC Charlotte's Graduate Catalog for additional detail about guidelines, degree requirements and dissertations.

6. Coursework and Training Opportunities

a. All Concentrations

- Doctoral-level courses are numbered at the 8000 level. Credit hours are provided in parentheses.

- The curriculum has 5 major curricular components:
  1. Core Health Psychology
  2. Research Methodology & Analytics
  3. Area of concentration (program)
     - General Health Psychology Concentration
     - Clinical Health Psychology Concentration

- Community Health Psychology Concentration

4. Interdisciplinary content
5. Electives

NOTE: Courses not included in the pre-approved list of interdisciplinary courses should: 1) Meet with their advisory committee to obtain their approval for enrolling in that course and 2) Complete an interdisciplinary course request form and submit it to the HPSY Director. Please note, courses need to be approved by the Program Director before they can be counted. Please also note that the above courses are not necessarily offered every semester and it is the student's responsibility to ensure courses fit their schedule.

i. Graduate Teaching of Psychology

The Graduate School offers the course *Teaching at the College or University Level* (GRAD 8011) for students interested in teaching. This course will prepare students to teach a lower level (1000 or 2000 level) undergraduate course as the instructor of record under the supervision of a Health Psychology faculty member.

Students are eligible for independent teaching if:
1) they have successfully completed GRAD 8011-001)
2) demonstrated excellence as a teaching assistant
3) have successfully completed their qualifying project
4) are in good standing in the program (i.e., not on probation)
Applications for teaching experiences for the academic year including the following summer can be obtained by submitting the completed *Request for Independent Teaching Form* (see Appendix) to the Director of the Health Psychology Program at the beginning of the fall semester of the year teaching experiences are sought. **Students are required to be enrolled in the Teaching Practicum course (PSYC 8223) during the semester of their first solo teaching assignment**. Students will be evaluated for effectiveness during their independent teaching experience. Student assignment to independent teaching will be based on course availability and interest match. Please note that the availability of undergraduate courses for independent teaching by Ph.D. students is limited. Priority will be given to those students who have not previously conducted independent teaching.

Guidelines for teaching credit

<u>Online courses</u>

Teaching an online course is equivalent to 10 hours per week as these courses have already been set up by full-time faculty members, so there will be minimal preparation time to make them your own. The main responsibility of the instructor is to answer student questions and grading assignments. The expected class size for these sections will be 30-35 students. To fill a 20-hour assistantship, you may teach two sections of this size, or one larger section of around 70 students. Available courses in this category include:

- PSYC 1201 Careers in Psychology (new catalog course as of Spring 2017)
- PSYC 2101 Research Methods 1
- PSYC 2113 Brain and Behavior

Traditional lecture/discussion format

For the first time teaching this course, the effort is equivalent to 20 hours per week. For each subsequent time you teach this course, each section will be equivalent to 10 hours per week. The expected class size for these sections will be 30-35 students. Once an instructor has prepared a class previously, they may request to teach two sections of 30-35 students or one larger section of about 70 students to fill a 20-hour teaching assistantship. Available courses in this category include:

- PSYC 2120 Child Psychology
- PSYC 2121 Adolescent Psychology
- PSYC 2124 Adulthood and Aging
- PSYC 2126 Psychology of Women
- PSYC 2130 Social Psychology
- PSYC 2150 Adjustment
- PSYC 2151 Abnormal Psychology
- PSYC 2160 Health Psychology

Solo teaching, PSYC 2103 Research Methods 2
This course is writing intensive and involves significant grading responsibilities each time it is taught, as such it counts as 20 hours per week. Pre-developed online sections are available. Expected class sizes will be kept to 15 students the first time an instructor teaches the course and will move to 20-25 students for subsequent course offerings.

b. General Health Psychology Concentration

i. General Concentration Curriculum & Degree Requirements

(Minimum credit hours required for graduation: 78)

Core Health Psychology Courses (12 credit hours)
HPSY 8200 - Health Psychology I (3)
HPSY 8201 - Health Psychology II (3)
HPSY 8243 - Diversity in Health Psychology (3)
PHIL 8240 - Research Ethics in the Biological and Behavioral Sciences (3)

Research Methodology and Analytics Courses (24 credit hours)
HPSY 8102 - Research Design and Quantitative Methods in Psychology (3)
HPSY 8103 - Basic Quantitative Analyses for Behavioral Sciences (3)
HPSY 8262 - Practicum in Health Psychology (3)
HPSY 8899 - Readings and Research in Psychology (up to 3 credit hours allowed)
HPSY 8999 - Doctoral Dissertation Research (up to 9 credit hours allowed)

Advanced Methodology Courses
Select two of the following:
HLTH 8221 - Qualitative Research I: Theory Generation in Behavioral Sciences (3)
HLTH 8222 - Qualitative Research II: Theory Generation and Analysis in Behavioral Sciences (3)
HLTH 8282 - Health Survey Design and Research (3)
HLTH 8602 - Communicating and Disseminating Research (3)
HPSY 8099 - Topics in Psychology (3) (Measurement and Scale Development)
HLTH 8281 - Measurement and Scale Development (3)
HPSY 8104 - Advanced Quantitative Analyses for Behavioral Sciences (3)
HPSY 8145 - Applied Research Design and Program Evaluation (3)
PPOL 8000 - Topics in Public Policy (3) (Categorical Data Analyses)
PPOL 8665 - Analytical Epidemiology (3)

Concentration Courses (9 credit hours)
Select three courses from three of the four domains (i.e., at least three of the four domains must be covered):

Biological/Physiological Domain
PSYC 6113 - Physiological Psychology (3)
PSYC 6115 - Sensation and Perception (3)

Cognitive Domain
PSYC 6111 - Psychology of Learning and Memory (3)
PSYC 6216 - Introduction to Cognitive Science (3)
PSYC 6116 - Cognition (3)
or HPSY 8099 - Topics in Psychology (3) (Cognition and Motivation)

Developmental Domain
PSYC 6124 - Psychology of Aging (3)
HPSY 8099 - Topics in Psychology (3) (Developmental Psychology)

Social-Personality Domain
PSYC 6130 - Social Psychology (3)
PSYC 6135 - Psychology of Personality (3)

Interdisciplinary Courses (15 credit hours)
Select five of the following:
COMM 6000 - Topics in Communication Studies (3) (Narratives of Health and Illness)
GRNT 6210 - Aging and Public Policy (3)
MPAD 6210 Aging and Public Policy (3)
GRNT 6600 - Current Issues in Gerontology (3)
HLTH 6201 - Social and Behavioral Foundations of Public Health (3)
HLTH 6207 - Community Health Planning and Evaluation (3)
HLTH 6221 - Community Health (3)

HLTH 8220 - Theories and Interventions in Behavioral Sciences (3)
HPSY 8145 - Applied Research Design and Program Evaluation (3)
HPSY 8155 - Community Psychology (3)
HPSY 8255 - Community Interventions (3)
HPSY 8455 - Practicum in Community Psychology (3)
HSRD 8000 - Topics in Health Services Research (3)
HSRD 8202 - Healthcare Systems and Delivery (3)
HSRD 8203 - Economics of Health and Healthcare (3)
PPOL 8667 - Economics of Health and Healthcare (3)
KNES 6285 - Advanced Cardiopulmonary Physiology (3)
NUDN 8202 - Community Epidemiology (3)
NURS 6115 - Health Policy and Planning in the U.S. (3)
PPOL 8661 - Social Organization of Healthcare (3)
PPOL 8663 - Health Policy (3)
SOCY 6090 - Topics in Sociology (3)
HPSY 8099 - Topics in Psychology (3)

Elective Courses (18 credit hours)
Select six courses from the following:
PSYC 6111 - Psychology of Learning and Memory (3)
PSYC 6113 - Physiological Psychology (3)
PSYC 6115 - Sensation and Perception (3)
PSYC 6116 - Cognition (3)
PSYC 6124 - Psychology of Aging (3)
PSYC 6130 - Social Psychology (3)
PSYC 6135 - Psychology of Personality (3)
PSYC 6216 - Introduction to Cognitive Science (3)
PSYC 6999 - Thesis (up to 6 credit hours allowed) (if student is co-enrolled in an M.A. in Psychology program)
HPSY 8099 - Topics in Psychology (3) (Developmental Psychology)
HPSY 8260 - Topics in Health Psychology (3) (Mindfulness)

*Electives or substitutions must be **pre-approved** by the student's Advisory Committee and the Health Psychology Director* (see the appendix for the approval form). ***Post-hoc approvals are not allowed.***

ii. Recommended Sequence

Note: Recommended sequence is subject to change. Specifically, it is recommended that advisors and students are mindful of fluctuations in course offerings and make adjustments to degree progress accordingly.

FIRST YEAR FALL SEMESTER
PSYC 8102 Research Methodologies in Behavioral Sciences (3)
PSYC 8200 Health Psychology I (3)
PHIL 8240 Research Ethics in the Biomedical and Behavioral Sciences (3)

FIRST YEAR SPRING SEMESTER
PSYC 8103 Basic Quantitative Analyses for Behavioral Sciences (3)
PSYC 8201 Health Psychology II (3)
GHP Distribution Course or Interdisciplinary Course (3)
GHP Distribution Course or Interdisciplinary Course (3)

SECOND YEAR FALL SEMESTER
GHP Distribution Course or Interdisciplinary Course (3)
Advanced Research or Quantitative Methods Course (3)
GHP Distribution Course or Interdisciplinary Course (3)

SECOND YEAR SPRING SEMESTER
PSYC 8243 Diversity in Health Psychology (3)
GHP Distribution Course or Interdisciplinary Course (3)
GHP Distribution Course or Interdisciplinary Course (3)
General Elective (3)

THIRD YEAR FALL SEMESTER
GHP Distribution Course or Interdisciplinary Course (3)
General Elective (3)
Advanced Research or Quantitative Methods Course (3)

THIRD YEAR SPRING SEMESTER
GHP Distribution Course or Interdisciplinary Course (3)
General Elective (3)
General Elective (3)
PSYC 8262 Practicum in Health Psychology (3)*

FOURTH YEAR FALL SEMESTER
GHP Distribution Course or Interdisciplinary Course (3)
General Elective (3)
PSYC 8999 Dissertation (3) [propose]

FOURTH YEAR SPRING SEMESTER
General Elective (3)
General Elective (3)
PSYC 8999 Dissertation (3) [defend]
*Students may complete the practicum during the summer and register the following Fall.

iii. General Training and Practicum Information

Consistent with the expected competencies of a Health Psychologist, our curriculum is designed to develop strengths in a number of areas, including:

1.1. Knowledge of psychological science: Students are trained in all of the basic areas of psychology, including biological bases of behavior, social psychology, developmental psychology, personality processes, and learning.

1.2. Knowledge of health psychology: Students are expected to develop expertise in the field of health psychology and should develop a professional

identity as health psychologists.

1.3. **Knowledge of core research methodologies:** Consistent with modern research, students are expected to develop expertise across the core research methodologies and modern data analytic techniques. In addition to the thesis and dissertation, students are expected to demonstrate these competencies via collaborations with faculty on research projects throughout their training, and the results of these research projects are to be published in journals and presented at regional, national, or international conferences.

1.4. **Theoretical and conceptual skills:** Health psychology, as a science, progresses through both research and theory. In addition to the mechanics of design and analysis, students are expected to develop the ability to conceptualize a problem and develop testable hypotheses regarding health.

Practicum Experience

The practicum experience for the General Health Psychology Program is considered an integral part of the student's doctoral education. The primary objective of the practicum experience is the development of additional research and/or professional skills and competencies that will benefit the student's emerging career path. The practicum experience should be tailored to the student's interests, developmental needs, and career goals.

A suitable practicum experience will be identified by the student and his/her advisor and is typically completed during the **third year of residency** after completion of the second year project or masters thesis (though it can be done earlier if appropriate). To be an eligible practicum experience, the proposed experience must be (a) an offsite (outside of the Psychology Department; preferably off campus) research or applied project designed to help the student gain practical experience and skills and (b) require at least 9 hours/week for 10 weeks in practicum-related activity, and (c) have a practicum supervisor on location other than the student's regular advisor.

Practicum experiences must be authorized ***in advance*** of starting the experience. The HPSY program will NOT authorize practicum experiences post hoc.

Upon completion of the practicum, a Practicum Evaluation form must be completed by the on-site practicum supervisor and returned to the Program Director. As students near the end of their practicum experience, they should contact the Program Director and ask that the evaluation form be sent to the on-site supervisor. It is the student's responsibility to request this form be sent to the supervisor. The supervisor will then return the evaluation form the Program Director, who will then provide copies to the student and his/her academic advisor. ***A practicum experience will not be considered completed until this form is on file.***

Students must register for at least 3 credits of practicum experience (PSYC 8262). If a student is completing the practicum experience during the summer, they may choose to delay their registration until the subsequent Fall semester.

c. Clinical Health Psychology Concentration

i. Clinical Concentration Curriculum & Degree Requirements

Minimum credit hours required for graduation: 88

Because changes are currently being made to APA accreditation standards*, students are advised that some course requirements are likely to change in the coming years. Please note that the number of credit hours listed below are the absolute minimum required for the clinical concentration. It is highly likely that most students (particularly those who do not enter our program with a masters' degree) will take more than this minimum before completing their degree.

***For any questions about the program's accreditation status or about APA accreditation, in general, please contact:**

Office of Program Consultation and Accreditation / American Psychological Association
750 First Street, NE, Washington, DC 20002-4242
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org / Web: http://www.apa.org/ed/accreditation

Core Health Psychology Courses (12 credit hours)
HPSY 8200 - Health Psychology I (3)
HPSY 8201 - Health Psychology II (3)
HPSY 8243 - Diversity in Health Psychology (3)
HPSY 8107 - Ethical and Professional Issues in Psychology (3)

Research Methodology and Analytics Courses (18 credit hours)
HPSY 8102 - Research Design and Quantitative Methods in Psychology (3)
HPSY 8103 - Basic Quantitative Analyses for Behavioral Sciences (3)
HPSY 8899 - Readings and Research in Psychology (1-4) (up to 3 credits may count toward degree requirements, but students can take as many as desired)
HPSY 8999 - Doctoral Dissertation Research (1-9) (up to 9 credits total may count toward degree credits, but students can take as many as desired)

Advanced Methodology Course
Select one of the following:
HLTH 8221 - Qualitative Research I: Theory Generation in Behavioral Sciences (3)
HLTH 8222 - Qualitative Research II: Theory Generation
and Analysis in Behavioral Sciences (3)
HLTH 8282 - Health Survey Design and Research (3)
HLTH 8602 - Communicating and Disseminating Research (3)
HPSY 8099 - Topics in Psychology (3) (Measurement and Scale Development)
or HLTH 8281 - Measurement and Scale Development (3)
HPSY 8104 - Advanced Quantitative Analyses for Behavioral Sciences (3)
HPSY 8145 - Applied Research Design and Program Evaluation (3)
PPOL 8000 - Topics in Public Policy (3) (Categorical Data Analyses)
PPOL 8665 - Analytical Epidemiology (3)

Concentration Courses (49 credit hours)

HPSY 8050 - Topics in Psychological Treatment (3)
HPSY 8141 - Intellectual Assessment (4)
HPSY 8142 - Personality Assessment (4)
HPSY 8150 - Introduction to Psychological Treatment (4)
HPSY 8151 - Behavior Disorders (4)
HPSY 8240 - History and Systems of Psychology (3)
HPSY 8245 - Clinical Supervision and Consultation (3)
HPSY 8450 - Practicum in Clinical Psychology (9) (1-3 hours per semester for a minimum total of 12 credit hours. For students with prior graduate clinical training, a minimum of 6 credit hours needs to be completed in residence. Unless special arrangements are made because of a student's prior clinical training, all second year students will take two semesters of practicum class focused on broad and general clinical skills (e.g., CBT, ACT) and all third year students will take two semesters of practicum class focused on clinical health psychology in medical settings. Beginning in 4th year, students must enroll for at least one practicum credit every fall and spring that they are seeing clients at a practicum site.)
HPSY 8950 - Internship (0)- students are required to complete a 1-year clinical internship.

Breadth Courses
APA* requires breadth of education across the broader disciplines of scientific psychology for students in the Clinical program. Clinical students are required to complete graduate level courses in each of the following areas:

PSYC 6113 - Physiological Psychology (3)
PSYC 6116 - Cognition (3)
or HPSY 8099 - Topics in Psychology (3) (Cognition and Affect)
PSYC 6130 - Social Psychology (3)
HPSY 8099 - Topics in Psychology (3) (Developmental)

These courses will be offered on a regular basis and the program seeks to schedule at least one of these breadth courses per semester.

***For any questions about the program's accreditation status or about APA accreditation, in general, please contact:**

Office of Program Consultation and Accreditation / American Psychological Association
750 First Street, NE, Washington, DC 20002-4242
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org / Web: http://www.apa.org/ed/accreditation

Interdisciplinary Courses (9 credit hours)
Select three of the following:
COMM 6000 - Topics in Communication Studies (3) (Narratives of Health and Illness)
GRNT 6210 - Aging and Public Policy (3)
or MPAD 6210 Aging and Public Policy (3)
GRNT 6600 - Current Issues in Gerontology (3)
HLTH 6201 - Social and Behavioral Foundations of Public Health (3)
HLTH 6207 - Community Health Planning and Evaluation (3)

HLTH 6221 - Community Health (3)
HLTH 8220 - Theories and Interventions in Behavioral Sciences (3)
HPSY 8145 - Applied Research Design and Program Evaluation (3)
HPSY 8155 - Community Psychology (3)
HPSY 8255 - Community Interventions (3)
HPSY 8455 - Practicum in Community Psychology (3)
HSRD 8000 - Topics in Health Services Research (3)
HSRD 8202 - Healthcare Systems and Delivery (3)
HSRD 8203 - Economics of Health and Healthcare (3)
or PPOL 8667 - Economics of Health and Healthcare (3)
KNES 6285 - Advanced Cardiopulmonary Physiology (3)
NUDN 8202 - Community Epidemiology (3)
NURS 6115 - Health Policy and Planning in the U.S. (3)
PPOL 8661 - Social Organization of Healthcare (3)
PPOL 8663 - Health Policy (3)
SOCY 6090 - Topics in Sociology (3)
HPSY 8099 - Topics in Psychology (3)

*Electives or substitutions must be **pre-approved** by the student's Advisory Committee and the Health Psychology Director* (see the appendix for the approval form). ***Post-hoc approvals are not allowed.***

ii. Recommended Sequence

FIRST YEAR FALL SEMESTER
PSYC 8102 Research Design and Quantitative Methods I (3)
PSYC 8200 Health Psychology 1 (3)
PSYC 8151 Behavior Disorders (4)
PSYC 8141 Intellectual Assessment (4)

FIRST YEAR SPRING SEMESTER
PSYC 8103 Research Design and Quantitative Methods 2 (3)
PSYC 8201 Health Psychology 2 (3)
PSYC 8150 Introduction to Treatment (4)
PSYC 8142 Personality Assessment (4)

SECOND YEAR FALL SEMESTER
PSYC 8243 Diversity in Health Psychology or Interdisciplinary course
PSYC 8450 Practicum in Clinical Psychology (3)
PSYC 8107 Ethics/Professional Issues (3)
PSYC 8899 Readings and Research (1-3)

SECOND YEAR SPRING SEMESTER
PSYC 8050 Topics in Treatment (3)
PSYC 8450 Practicum in Clinical Psychology (3)
Breadth Course (3) or PSYC 8899 Readings and Research (1-3) or Interdisciplinary course

THIRD YEAR FALL SEMESTER
PSYC 8450 Practicum in Clinical Psychology (3)
Breadth course (3)
PSYC 8243 Diversity in Health Psychology or Interdisciplinary course (3)

Advanced Research or Quantitative Methods Course (3)

THIRD YEAR SPRING SEMESTER
PSYC 8450 Practicum in Clinical Psychology (3)
Breadth course (3)
Elective or PSYC 8245 Clinical Supervision and Consultation or Interdisciplinary course (3)
PSYC 8899 Readings and Research

FOURTH YEAR FALL SEMESTER
PSYC 8450 Practicum in Clinical Psychology (1-3)
PSYC 8999 Dissertation (3)
Breadth course (3)
PSYC 8899 Dissertation
Interdisciplinary course (3)

FOURTH YEAR SPRING SEMESTER
PSYC 8450 Practicum in Clinical Psychology (1-3)
PSYC 8999 Dissertation (3)
Breadth course (3) or PSYC 8245 Clinical Supervision and Consultation
PSYC 8899 Dissertation (3)

FIFTH YEAR
Pre-doctoral internship (3-6)

The first year of the above sequence of study is required for adequate preparation for practicum. After the first year of training, the sequence is recommended. Students should discuss their course sequence with their advisory committees on a regular basis.

iii. Clinical Training and Practicum Information

Consistent with our identification as a Scientist-Practitioner program, clinical students are expected to develop expertise in both research and clinical practice. This section provides more detail about our clinical training.

Clinical training is a core element of the Clinical concentration/program of the Health Psychology Program and, ideally, is integrated with students' research and academic experiences. The Director of Clinical Training (DCT: currently Dr. Amy Peterman) is responsible for coordinating, monitoring, and evaluating these experiences. The student should work with the DCT, as well as their primary advisor, to tailor clinical experiences that work best for their career interests and goals.

Clinical Practicum (Sites and Information)
List of all clinical practicum sites

Background: A practicum is a formal, supervised experience in clinical psychology for which one earns academic credit. Practica usually last for 9 to 12 months and consist of, at minimum, an average of 10 hours per week, but no more than an average of 20 hours per week. There is some flexibility in hours, particularly during the summer.. Practicum hours include provision of direct clinical services, as well as clinically related activities such as supervision, record keeping, etc. A formal practicum agreement will

outline the responsibilities of the practicum site, student trainee, and the clinical Health Psychology program (see Appendix). This will be signed prior to, or shortly after the start of, each practicum experience. Responsibility for updating this agreement lies jointly with the DCT, the site supervisor and the student.

Students generally begin practicum in their second year of residence in the program. During their first year, they are expected to take courses that will prepare them for practicum including the following: Intellectual Assessment and/or Personality Assessment, Behavior Disorders, and Introduction to Psychological Treatment. It is also expected that the health psychology course sequence (Health Psychology 1 and 2) will provide important background information prior to practicum.

Practicum Readiness: Students are ready for practicum if they meet the following criteria: are in good standing in the program (i.e., not on probation), have successfully completed the above courses in the first year, and are approved by the DCT based on their consultation with their primary advisor and other Health Psychology faculty. Each spring, a practicum meeting is held for all students and the DCT. The DCT and clinical representative supply general information about the practicum choices available for the coming year and the process of choosing a practicum. Then, more advanced students describe their current practicum placements and answer questions about the training opportunities that are available. The clinical representative attends this meeting and summarizes the information for students who are unable to attend.

Following this meeting, each student sends an email to the DCT to indicate their top choices for practicum for the coming year. The DCT then meets individually with students to discuss their choices and the contribution that a particular site will make to the student's internship readiness. Finally, the DCT assigns students to practicum sites based on their preferences: in almost all cases, students are given their first or second choice. In the event of competition for a particular site, more advanced students are given preference over more junior students in a given year. Junior students get preference for that site in a subsequent year if they're still interested in it.

The DCT coordinates this process and guides students to appropriate sites. For instance, some sites are more suited for those with previous clinical experience and have conveyed a desire for more advanced students, whereas other sites are willing to take students without previous clinical experience. Students generally get their first or second choice of practicum site.

Practicum Course Enrollment: Students register for three credit practicum courses during the Fall and Spring semesters of their second and third years in the program. These courses are a combination of clinically-focused didactics and group clinical supervision. When students take a third or fourth practicum, they again register for HPSY 8450 but they do not attend the regular meetings of this course. Students may meet with an individual supervisor and may be required to complete assignments that are relevant to their current practicum.

Most practicum sites, other than the Student Counseling Center, require a full year (12 month) commitment from students: that is, external practicum sites do NOT operate on an academic schedule and they provide clinical services year round. This means that students must organize their schedules to be available for practicum during this time.

In all practicum courses, students are assigned grades ranging from A to U (Unsatisfactory). Because the final evaluation from site supervisors may come after the semester, a grade of IP (In Progress) is given until all the evaluations are completed. The final letter grade is assigned by the practicum course instructor or the DCT in consultation with the site supervisor and the UNC Charlotte faculty member teaching Practicum in Clinical Psychology. For the most part, the DCT assigns the grade the instructor of the course recommends, but reserves the right to assign a different grade based on information from the practicum site.

Students who are engaged in clinical work as part of a paying job or grant should inform the DCT about the nature and extent of their clinical work. They will determine academic and supervision requirements on a case-by-case basis.

Number of Practica Needed: Students entering without a master's degree in clinical psychology will take at least two clinical practica while in residence: most will complete three or four practica in order to obtain the experience necessary for internship. The first clinical experience is housed in the Student Counseling Center on campus. Please see below for a description of other possible practicum sites.

Ideally, these will reflect a mix of experiences, but at least one will focus on health/behavioral medicine issues and will be housed in a medical or healthcare facility. Across these two experiences, students should seek to earn a minimum of 1,000 hours (500 direct) of clinical experience if possible. There will be, of course, variability in hours accrued based on placement, workload, clinical interests, etc. Students entering with a master's degree in clinical psychology (with requisite clinical experiences) will generally complete two or three practica while in residence. The number of practica will depend on their previous training and experiences. Overall, students should consult with the DCT and their academic advisor to plan their clinical training and to ensure that they are getting the training experiences that they need and/or desire.

Students who completed practicum training within a regionally accredited university can apply for advanced placement in clinical training, which would mean that they would not be required to complete the "Beginning Practicum" experience at the Student Counseling Center. To do so, students will submit a written description of the site(s) at which the practicum/a occurred, the type (e.g., group, individual) and number of weekly supervision hours, and the clinical population seen. Supervisor evaluations of the students' clinical work will also be submitted if available. The DCT, in consultation with other clinical faculty, will review these materials to evaluate the comparability of the prior practicum to the initial training provided in our program. If the experiences are substantially comparable and students received at least a "satisfactory" rating from previous supervisors, the DCT will then determine that students can receive advanced

placement. This qualifies students for an advanced practicum during the annual practicum assignment cycle (see above under “Practicum Readiness) in the following spring.

Requirements for Practicum: Prior to starting each practicum, each student must purchase professional liability or malpractice insurance, which is available at low cost to students. The DCT will need proof of this before the student begins the practicum. For each practicum, students sign a letter of agreement between the site and UNC Charlotte (represented by the DCT). In each practicum, students are evaluated by the practicum supervisor twice, at the half-way point and at the end of the experience (see the Appendix). At the conclusion of the practicum, the student must evaluate the site and the site supervisor (see the Appendix). This form is returned to the DCT and, after several students have progressed through the site, this information is collated and sent to the site. Students cannot be individually identified.
While on practicum, students are responsible for tracking their clinical hours using the Excel form provided by the DCT or the Time2Track program. Failure to do this may result in delays in applying for internship, incomplete grades, or other academic or clinical difficulties. If the student experiences difficulties or conflicts on site, the student should first seek to address these with the site supervisor, per American Psychological Association guidelines. If this is not successful or the student does not feel comfortable doing this, they should address these issues with the instructor of the practicum course and/or the DCT.

Comprehensive Clinical Examination

Judging a student’s clinical and professional readiness for internship is a key issue for doctoral programs in clinical psychology. At UNC Charlotte, we achieve this in several ways including performance in clinical courses, practicum ratings from supervisors, and completion of the Clinical Comprehensive Examination (i.e., clinical comps). This examination is in the form of a written paper and a clinical case conference. The ability to communicate about clients in both written and oral forms are important aspects of the professional development of clinical health psychologists. Such presentations serve to provide the student an opportunity to integrate academic and clinical work and to sharpen their conceptualization of cases and communication skills. Moreover, the case presentation provides the faculty with a concise and standardized format to evaluate students’ clinical competencies, while also evaluating behavioral indicators of competency (i.e., video or audio tape). Successful completion of this case presentation is one of the requirements for applying for internship. The case presentation will be on a current or past client and will consist of a written paper and an oral presentation. Details about the timing, format, evaluation process, etc. are provided below.

Predoctoral Internship

Predoctoral internship is a full-year clinical experience that can be completed at a variety of sites throughout the US and Canada. It is required that students complete an APA-accredited internship, which is obtained through participation in the application

process run by the Association of Psychology Postdoctoral and Internship Centers (APPIC) and the National Matching Service. Unfortunately, there are only 2 APA-accredited internship sites in the Charlotte area (UNC Charlotte Counseling Center, and Salisbury VA Medical Center). Because of the scarcity of local sites, it is likely that one must be flexible and willing to move to a different location for internship. Students who wish to apply for internship must meet the following criteria: be in good standing in the program (e.g., not on probation), complete all relevant clinical coursework, successfully complete the Comprehensive Clinical Examination, be approved by the DCT in consultation with HPSY clinical faculty, and propose their dissertation by **October 15th** of the year prior to internship. While on internship students must be continually registered for Internship during the Fall and Spring semesters (PSYC 8950). Summer internship registration is not required by the HPSY program provided that there is a formal internship contract between the internship site and the program. However, each student is responsible for checking with the DCT at their internship site to be certain that the internship does not require summer registration. Students may register for one to three internship credits per semester. However, each student should check with their student loan provider (if applicable) to determine the minimum number of credit hours required for registration in order to avoid initiation of loan payback.

Submission of information to the various internship sites is generally due in November or December with the internship beginning either the next summer or fall. All application materials are submitted electronically. Additional information on the internship application process, as well as internship sites, is available at www.appic.org.

Licensure

Graduates of the clinical concentration/program are license eligible in North Carolina and many other states after completing their pre-doctoral internship and one-year of supervised post-doctoral experience. Some states require provisional licensure during the time that students are accruing post-doctoral supervised clinical hours. Students are strongly encouraged to check the website of the American Society of Professional Psychology Boards (www.asppb.org) or the individual state's licensing board to determine licensure and practice requirements. It is particularly important that students be aware of regulations related to the timing of degree completion vis-à-vis' the start of post-doctoral hours and license application. *Despite the fact that our program is now APA-accredited*, some state licensing boards are still requiring copies of all course syllabi.*

***For any questions about the program's accreditation status or about APA accreditation, in general, please contact:**

Office of Program Consultation and Accreditation / American Psychological Association
750 First Street, NE, Washington, DC 20002-4242
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org / Web: http://www.apa.org/ed/accreditation

Testing library

Please note that the Program maintains a large library of psychological tests that is available for all students. Students may use these tests on practicum or for research. These tests are located in Colvard 4004 and 4126. The DCT maintains a complete list of tests, as well as policies and procedures for their use (see Appendix)

d. Community Health Psychology Concentration

i. Curriculum & Degree Requirements

Minimum credit hours required for graduation: Minimum of 78 credit hours.

Core Health Psychology Courses (12 credit hours)
HPSY 8200 - Health Psychology I (3)
HPSY 8201 - Health Psychology II (3)
HPSY 8243 - Diversity in Health Psychology (3)
PHIL 8240 - Research Ethics in the Biological and Behavioral Sciences (3)

Research Methodology and Analytics Courses (18 credit hours)
HPSY 8102 - Research Methodologies in Behavioral Sciences (3)
HPSY 8103 - Basic Quantitative Analyses for Behavioral Sciences (3)
HPSY 8455 - Practicum in Community Psychology (1 to 3) or PSYC 8355 - Community Research Practicum (3)
HPSY 8899 - Readings and Research in Psychology (1 to 3)
HPSY 8999 - Doctoral Dissertation Research (up to 9
credit hours allowed)

Advanced Methodology Course
Select one of the following:
HLTH 8221 - Qualitative Research I: Theory Generation in Behavioral Sciences (3)
HLTH 8222 - Qualitative Research II: Theory Generation and Analysis in Behavioral Sciences (3)
HLTH 8282 - Health Survey Design and Research (3)
HLTH 8602 - Communicating and Disseminating Research (3)
HPSY 8099 - Topics in Psychology (3) (Measurement and Scale Development)
or HLTH 8281 - Measurement and Scale Development (3)
HPSY 8104 - Advanced Quantitative Analyses for Behavioral Sciences (3)
HPSY 8145 - Applied Research Design and Program Evaluation (3)
PPOL 8000 - Topics in Public Policy (3) (Categorical Data Analyses)
PPOL 8665 - Analytical Epidemiology (3)

Concentration Courses (12 credit hours)
HPSY 8145 - Applied Research Design & Program Evaluation (3)
HPSY 8155 - Community Psychology (3)
HPSY 8255 - Community Interventions (3)
HPSY 8455 - Practicum in Community Psychology (1 to 3)

or PSYC 8355 - Community Research Practicum (3) - Of note, students need to complete a total of 6 practicum credits

Interdisciplinary Courses (15 credit hours)
Select five of the following:
COMM 6000 - Topics in Communication Studies (3) (Narratives of Health and Illness)
GRNT 6210 - Aging and Public Policy (3)
or MPAD 6210 Aging and Public Policy (3)
GRNT 6600 - Current Issues in Gerontology (3)
HLTH 6201 - Social and Behavioral Foundations of Public Health (3)
HLTH 6207 - Community Health Planning and Evaluation (3)
HLTH 6221 - Community Health (3)
HLTH 8220 - Theories and Interventions in Behavioral Sciences (3)
HPSY 8145 - Applied Research Design and Program Evaluation (3)
HPSY 8155 - Community Psychology (3)
HPSY 8255 - Community Interventions (3)
HPSY 8455 - Practicum in Community Psychology (3)
HSRD 8000 - Topics in Health Services Research (3)
HSRD 8202 - Healthcare Systems and Delivery (3)
HSRD 8203 - Economics of Health and Healthcare (3)
or PPOL 8667 - Economics of Health and Healthcare (3)
KNES 6285 - Advanced Cardiopulmonary Physiology (3)
NUDN 8202 - Community Epidemiology (3)
NURS 6115 - Health Policy and Planning in the U.S. (3)
PPOL 8661 - Social Organization of Healthcare (3)
PPOL 8663 - Health Policy (3)
SOCY 6090 - Topics in Sociology (3)
HPSY 8099 - Topics in Psychology (3)

Elective Courses (21 credit hours)
Select seven courses from the following:
HPSY 8099 - Topics in Psychology (3) (Developmental Psychology)
HPSY 8260 - Topics in Health Psychology (3) (Mindfulness)
PSYC 6111 - Psychology of Learning and Memory (3)
PSYC 6113 - Physiological Psychology (3)
PSYC 6115 - Sensation and Perception (3)
PSYC 6116 - Cognition (3)
PSYC 6124 - Psychology of Aging (3)
PSYC 6130 - Social Psychology (3)
PSYC 6135 - Psychology of Personality (3)
PSYC 6216 - Introduction to Cognitive Science (3)
PSYC 6999 - Thesis (up to 6 credit hours allowed) (if student is co-enrolled in an M.A. in Psychology program)

*Electives or substitutions must be **pre-approved** by the student's Advisory Committee and the Health Psychology Director* (see the appendix for the approval form). ***Post-hoc approvals are not allowed.***

ii. Recommended Sequence

FIRST YEAR FALL SEMESTER
PSYC 8102 Research Design and Quantitative Methods I (3)
PSYC 8200 Health Psychology 1 (3)
PHIL 8240 Research Ethics in the Biomedical and Behavioral Sciences (3)

FIRST YEAR SPRING SEMESTER
PSYC 8103 Research Design and Quantitative Methods 2 (3)
PSYC 8201 Health Psychology 2 (3)
PSYC 8145 Applied Research Design and Program Evaluation (3)

SECOND YEAR FALL SEMESTER
PSYC 8155 Community Psychology (3)
PSYC 8000 Interdisciplinary Approaches to Health (3)
Advanced Research or Quantitative Methods Course (3)

SECOND YEAR SPRING SEMESTER
PSYC 8255 Community Interventions (3)
Interdisciplinary course (3)
Interdisciplinary course (3)

THIRD YEAR FALL SEMESTER
PSYC 8455 or 8555 Practicum in Community Psychology (3)
Interdisciplinary course (3)
Interdisciplinary course (3)
Elective (3)

THIRD YEAR SPRING SEMESTER
PSYC 8455 or 8555 Practicum in Community Psychology (3)
Interdisciplinary course (3)
Elective (3)

FOURTH YEAR FALL SEMESTER
Elective (3)
PSYC 8455 or 8555 Practicum in Community Psychology (3)
PSYC 8999 Dissertation (3)

FOURTH YEAR SPRING SEMESTER
Elective (3)
PSYC 8999 Dissertation (3)

iii. Practicum Information

Students receive applied training and experiences in all courses specific to the Community program. In the core course sequence, which includes Community Psychology, Applied Research and Program Evaluation, and Community Interventions courses, students work with community agencies on applied class projects that are

designed to build skills and address needs in the community. The Community Research Practicum and Practicum in Community Psychology involve individual projects with community organizations. In the Community Research Practicum, the focus is on applying research to address community needs and guide interventions, whereas the Practicum in Community Psychology is oriented toward developing community intervention skills or community practice-based competencies, although evaluation of interventions is always part of the process. Thus the distinction between Community Practicum and Community Research Practicum is a matter of relative emphasis on developing research skills versus practice skills.

The specific sites of community practica and other applied community psychology experiences can vary as a function of the various opportunities that exist for students to become involved and develop their skills, and the availability of appropriate on-site supervision. Student interests, professional goals, and plans of study are also of relevance for the selection of the site and project. Most projects involve partnerships with local government entities or nonprofit organizations. The pages that follow include (a) a sample practicum agreement for the student role and scope of work, as well as (b) a description of practicum learning goals for an applied placement.

7. Procedures

a. Transfer of Credit

Students may transfer up to 30 credit hours from previous graduate level work, only if these courses are appropriate for the Health Psychology Program and meet the guidelines established by the Graduate School. The steps below need to be followed to seek credit transfer:

- Develop a list of courses that you believe should count as transfer credit and cross-list against the equivalent courses offered by the Program. Obtain a copy of the syllabus of each course you wish to transfer.

- Submit a copy of the syllabi to your primary advisor. If your advisor approves those courses, a copy of the syllabi should be reviewed by your advisory committee. If they agree that the transfer course is substantially equivalent to our program course, your committee will recommend to the Program Director that the transfer(s) be accepted.

- The Program Director will review the request and if s/he approves it then the student will submit a formal academic petition to the Graduate School to finalize this process.

- For clinical courses submit the syllabi from clinical coursework to the DCT, who will follow the procedures outlined below.

- Your primary advisor and members of your advisory committee will review that list and the syllabus for each of the non-clinical courses. Your primary advisor will make a recommendation to the Program Director to accept or not accept those courses.

- The Director of Clinical Training will contact the clinical faculty member who teaches the clinical course for which credit is requested and will ask her/him to review the syllabus submitted by the student. If the course instructor and the DCT agree that the transfer course is substantially equivalent to our program course, the DCT will recommend to the Program Director that the transfer(s) be accepted. IN MOST CASES, STUDENTS WILL NOT BE ALLOWED TO TRANSFER CLINICAL COURSES FROM OTHER INSTITUTIONS.

- The Program Director will review these recommendations and approve or disapprove. If the Director approves the transfer, the student will need to complete a special request via the Graduate School.

- Submit Request for Transfer of Credit to the Graduate school

The Dean of the Graduate School will either accept or reject the Director's recommendation. Students are encouraged to monitor their transcript regularly to determine if the transcript request was approved as the Program will not be formally informed of these decisions.

b. Annual Evaluation

Students in the Health Psychology Program are evaluated yearly in areas such as progress in meeting programmatic milestones, coursework, scholarship and research activities, as well as clinical training and teaching (if applicable). This evaluation is conducted by the Program Director and the core faculty in your specific concentration/program. The evaluation is based on the Self-Report of Professional Accomplishments (see the Appendix) that is submitted to the Director, as well as relevant information from faculty with whom you have worked and/or had as instructors. First year students are evaluated twice during their first year of graduate studies, at the end of the fall and spring semesters. Following the first year of study, students are evaluated annually at the end of the spring semester. Students on programmatic probation or with other difficulties are evaluated every semester. Students should receive their annual evaluation letter by the beginning of the fall semester of the following year. Students who have not received their annual evaluation letter by this time should contact the Program Director.

c. Programmatic Probation

Based on Graduate School guidelines, students will be placed on programmatic probation under any of the following conditions:

- The student fails to complete a programmatic milestone even after an approved 6-month extension.
- The student fails to meet the minimum grade requirements for the program.

Once on probation, the student must complete the milestone in question or raise her/his grade point average by the end of the following semester. Failure to successfully meet programmatic expectations during the probationary period may lead to termination from the Program. Further, students on programmatic probation will have the lowest priority for graduate assistantships and will not be able to teach independently at the undergraduate level.

Students may appeal in writing their probationary status to the Program Director. The written appeal should provide an explanation of the circumstances that led to failure to meet programmatic milestones or grade requirements and a plan for meeting the requirements during the following semester. Following receipt of the written appeal, the Director will conduct a face-to-face meeting with the student and advisor(s) within 30 days of receiving the written appeal to clarify details specified in the appeal. Students will be notified of any actions on their appeal within 30 days following the face-to-face meeting.

If students do not make reasonable efforts to resolve issues that lead to programmatic probation, the Director will appoint a Faculty Board to issue a recommendation regarding termination from the program. The faculty board will conduct:

- A review of the student's progress in the Program.

- A review of the actions taken by the Program to assist the student in the process of meeting programmatic milestones, grade requirements, and professional competency standards.

- Conduct a hearing with the student to discuss his or her efforts to meet programmatic requirements, progress made at the end of the probationary status, and any circumstances that may have prevented the student from meeting these requirements.

The faculty board will make a written recommendation to the Program Director with regard to the student's termination based upon the results of the process outlined above.

d. Programmatic Termination

Failure to meet programmatic milestones. Students who have not been able to meet programmatic milestones may be terminated from the program. The Program Director will make a recommendation to the Dean of the Graduate School regarding a student's termination from the Program after consulting with the Faculty Board appointed to

review the students' academic performance in the program. Students have the right to appeal this decision to the Graduate School (see **Student Grievance Procedure).** **Academic Suspension.** The accumulation of three marginal C grades in any graduate course will result in the suspension of enrollment by the Graduate School. Any student receiving a grade of U in any course will be terminated. Students who have been suspended or terminated are ineligible to register in any semester or summer session until they have been properly reinstated (see Graduate Catalog).

e. Student Grievance Procedure

The Health Psychology Program recognizes that in the course of students' involvement with the Program, issues or concerns regarding their relationship with program faculty or other program-related activities may emerge. Students are encouraged to attempt to resolve these issues/concerns informally with the faculty member or to seek assistance from their primary advisor, the Director of the Program or the Director of Clinical Training (DCT). In some cases, issues may most appropriately be addressed by organizations such as the Health Psychology Program Advisory Committee or the Health Psychology Graduate Student Association (HPGSA). However, there may be instances in which, due to the nature of the concern, a student does not feel comfortable or cannot raise an issue via these routes. In some cases, issues may most appropriately be addressed by organizations such as the Health Psychology Program Advisory Committee or the Health Psychology Graduate Student Association (HPGSA). However, there may be instances in which, due to the nature of the concern, a student does not feel comfortable or cannot raise an issue via these routes.

i. Ombudsperson

To ensure that Health Psychology students have an outlet for such concerns, students will vote on Ombudspersons. Of note, in response to student feedback, the current process of selecting the Ombudspersons is being revised by HPGSA. After a pilot phase (2020-2021 school year), the process will be finalized in the 2021-2022 handbook.

As part of the current pilot phase, students elect 3 program liaisons, annually. Two of these liaisons are faculty; 1 faculty member from within the Health Psychology Program and 1 from outside the Program. One of these liaisons is a former or current Health Psychology student. The student should have finished with classwork and be completing their dissertation, or should have recently graduated from the program. These ombudspersons will serve for a period of one calendar year (January – December) with the possibility of renewing the appointment.

A list of current ombudspersons can be found on the Health Psychology website.

The Graduate School also provides an ombudsperson for all graduate students. Additional information about the graduate school ombudsperson, including their role and contact information can be found here.

Updated election process

HPGSA will be responsible for facilitating the election process. As in prior years, the Health Psychology students will continue to have two faculty ombudspersons. One ombudsperson will continue to be a core Health Psychology faculty, and one ombudsperson will continue to be a faculty member outside of the Health Psychology program. The outside faculty member may be familiar with the Health Psychology PhD program. If the outside faculty member is not familiar with the Health Psychology PhD program, the HPGSA president and other HPGSA officers, as well as the previous core faculty member serving as ombudsperson, will meet with the elected faculty member to discuss the structure of the Health Psychology PhD program and answer questions as necessary. Additionally, Health Psychology students will elect a student ombudsperson. This student ombudsperson must be finished with their classes, and may be either all but dissertation (ABD) or may have recently completed their PhD.

Of note, the Director of the Program and the Director of Clinical Training may not serve in the ombudsperson role.

Updated timeline

September: HPGSA officers brainstorm possible ombudspersons (faculty and students)
October: HPGSA secretary shares list of potential ombudspersons and solicits additional recommendations from Health Psychology students.
October: HPGSA secretary sends out poll for Health Psychology students to vote on new ombudspersons.
November: HPGSA president approaches each elected ombudsperson with the most votes. HPGSA president continues to approach ombudspersons until each role is filled. HPGSA president provides ombudsperson guidelines to the elected ombudspersons to clarify the role.
December: HPGSA secretary shares new ombudspersons and contact information with Health Psychology students. HPGSA president meets with incoming ombudspersons to discuss the role and clarify any remaining questions.
January: HPGSA officers schedule an ombudsperson meet and greet with Health Psychology students. This may occur during an already scheduled meeting as time allows.

- The purpose of this meeting is to introduce students and the ombudspersons to one another, to foster an initial relationship between the ombudspersons and the students. Prior to this meeting, the HPGSA secretary should share the HPGSA Ombudsperson Resource for Students with students (under development as of 11/2020).

Ombudspersons elected in the fall term (as described above), will serve for the following calendar year (e.g., the spring and the following fall semester).

<u>The role of the Ombudspersons:</u>

- The Ombudspersons will be responsible for providing consultation/advice to students regarding: 1) issues related to interactions with primary advisors or advisory committees; 2) issues involving Health Psychology faculty and faculty in other departments; 3) issues/concerns related to program or departmental staff; 4) issues/concerns related to Program requirements (e.g., practicum placement, supervisors, etc.); and 5) other Program- or university-related concerns.
- In some cases (e.g., issues of professional ethics; classroom content or structure; inquiries or issues regarding practicum placements or supervisors), the issue may be best addressed within the context of existing Program structures; at such times, the ombudsperson's primary role is to work with students toward identifying the best course of action and guiding them in the process of achieving resolution.
- It is expected that discussions between ombudspersons and students will remain confidential unless what is discussed is in direct violation of university policy, necessitating a breach of confidentiality.

The procedures outlined above do not replace the procedures set by the Graduate School regarding issues related to student difficulties including grade appeals, academic integrity violations, sexual harassment, disability, and discrimination; rather, they are intended to serve as an additional mechanism for resolving student-related concerns.

Regardless of whether a student decides to seek assistance from the ombudsperson(s) to resolve the differences or grievances, or if the student is not satisfied with the response from the ombudsperson, the student always has the option to present the grievance in writing (e.g., email) to the Program Director. According to the guidelines established by UNC Charlotte, any such written grievance must be received by the Director no later than **forty-five calendar days** after the student first became aware of the facts which gave rise to the grievance. If the grievance is against the Program Director, the student should address his or her grievance to the Dean of the Graduate School or appropriate Assistant Dean. The Director should conduct an informal investigation as warranted to resolve any factual disputes. Upon the student's request, the Director shall appoint an impartial fact-finding panel of no more than three persons to conduct an investigation. The Director must state the terms and conditions of the investigation in a memorandum appointing the fact-finding panel. A fact-finding panel appointed hereunder shall have no authority to make recommendations or impose final action. The panel's conclusions shall be limited to determining and presenting facts to the Director in a written report.

Based upon the report of the fact-finding panel if any, the Director shall make a determination and submit his or her decision in writing to the student and to the person alleged to have caused the grievance within ten calendar days of receipt of the panel's report. The written determination shall include the reasons for the decision, shall indicate the remedial action to be taken if any, and shall inform the student of the right to seek review by the Dean of the Graduate School.

Students may appeal the recommendation issued by the Program Director to the Dean of the Graduate School. Additional information about the University's grievance procedures can be found here.

f. Sexual Harassment Policy

The HPSY Program adheres to the University's policy regarding sexual harassment involving students, faculty, or any employee of the university. Details about UNCCs policy can be found here.

Graduate School Forms

Additionally, active graduate students should submit all academic requests via the Graduate Academic Petition system. Please visit the graduate school website for a detailed overview of and access to the different types of requests.

Of note, effective October 14 2020, all Committee Appointment, Proposal/Final Defense, ETD and Embargo forms will be transitioning to DocuSign. Docusign, a university-supported digital system allows for the secure collection of signatures and proper electronic routing. These forms can be accessed on the Graduate School Forms website. Scanned paper forms will still be accepted throughout the Spring semester.

Important: In order to ensure proper routing, please make sure to only use the Graduate School's Form Series and NOT a Form previously developed by an academic unit or otherwise. In addition, Docusign's routing system only recognizes NinerNet username email addresses and NOT alias email addresses.

Health Psychology Program Contracts and Forms

All forms can be accessed via the shared google drive - Program Resources and Information. Please note that the system only recognizes NinerNet username email addresses.

- Student Advisory Committee Approval Form
- Request for Approval of Advanced Research Methods Courses
    - Policy Statement - Advanced Research Methodology Requirement
- Request for Approval of Interdisciplinary Courses
- Request for Approval of General Concentration Specific Electives
- Request for Student Travel Funds
- Request for Research Funds
- Student Learning Outcomes & Rubrics
    - Second Year Project
    - Comprehensive Qualifying Project
    - Clinical Comprehensive Exam
    - Dissertation
- General Concentration Forms
    - General Health Psychology Practicum Evaluation Form
- Clinical Concentration Forms
    - Clinical Concentration Practicum Agreement Template
    - Practicum Site Student Evaluation Form - Clinical Concentration
    - Sample Practicum Hour Tracking Form
- Community Concentration Forms
    - Practicum Agreement Template for Community Health Psychology
    - Example Description Used for Applied Practicum in Community Psychology